



Australian Government

**Australian Institute of
Health and Welfare**

Health expenditure Australia 2011–12: analysis by sector

HEALTH AND WELFARE EXPENDITURE SERIES NO. 51



Australian Government

Australian Institute of
Health and Welfare

*Authoritative information and statistics
to promote better health and wellbeing*

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Number 51

Health expenditure Australia 2011–12: analysis by sector

Australian Institute of Health and Welfare
Canberra

Cat. no. HWE 60

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ISSN 1323-5850

ISBN 978-1-74249-543-9

Suggested citation

Australian Institute of Health and Welfare 2014. Health expenditure Australia 2011–12: analysis by sector. Health and welfare expenditure series no. 51. Cat. no. HWE 60. Canberra: AIHW.

Australian Institute of Health and Welfare

Board Chair
Dr Andrew Refshauge

Director
David Kalisch

Any enquiries about or comments on this publication should be directed to:

Media and Strategic Engagement Unit
Australian Institute of Health and Welfare
GPO Box 570
Canberra ACT 2601
Tel: (02) 6244 1032
Email: info@aihw.gov.au
Published by the Australian Institute of Health and Welfare

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**Please note that there is the potential for minor revisions of data in this report.
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Acknowledgments

This report would not have been possible without the valued cooperation and effort of the data providers in the health authorities of the states and territories and the Australian Government. The Australian Institute of Health and Welfare (AIHW) would like to express its appreciation to state and territory and other providers for the timely supply of data and assistance with data validation. The AIHW also wishes to thank the members of the Health Expenditure Advisory Committee who helped to plan this report and provided advice on its content.

Rebecca Bennetts, Elizabeth Dernie, Adam Majchrzak-Smith and Adrian Webster collected and analysed the data and wrote this publication.

Abbreviations

| | |
|--------|--|
| ABS | Australian Bureau of Statistics |
| AIHW | Australian Institute of Health and Welfare |
| DVA | Australian Government Department of Veterans' Affairs |
| GFC | Global Financial Crisis |
| GP | General Practitioner |
| HEAC | Health Expenditure Advisory Committee |
| IPD | Implicit Price Deflator |
| MBS | Medicare Benefits Schedule |
| NHA | National Health Accounts |
| OECD | Organisation for Economic Co-operation and Development |
| PBS | Pharmaceutical Benefits Scheme |
| PHIIS | Private Health Insurance Incentives Scheme |
| PHOFAs | Public Health Outcome Funding Agreements |
| RPBS | Repatriation Pharmaceutical Benefits Scheme |

Symbols

| | |
|--------|-----------------------------|
| — | nil or rounded down to zero |
| .. | not applicable |
| n.e.c. | not elsewhere classified |

Summary

This report extends the analysis presented in *Health expenditure Australia 2011–12* to further explore expenditure on particular categories of health goods and services, including hospitals, primary health care, other recurrent health expenditure and capital expenditure.

Over the decade from 2001–02 to 2011–12, expenditure increased in real terms for all areas of expenditure: from \$31.0 billion to \$53.5 billion for hospitals; from \$30.8 billion to \$50.6 billion for primary health care; from \$16.9 billion to \$28.3 billion for other recurrent health expenditure; and from \$4.2 billion to \$7.9 billion for capital expenditure.

Growth did not occur at the same rate for all areas of expenditure. Between 2001–02 and 2005–06, the share of recurrent expenditure attributed to hospitals increased from 39.4% to 40.6%. The share for primary health care decreased over this time from 39.1% to 37.8%. No clear trend has been evident for expenditure in these areas since 2005–06. In 2011–12, hospitals comprised 40.4% of recurrent expenditure and primary health care comprised 38.2%.

The changing proportions of health expenditure are affected by the sources of funds (i.e. who is paying) and the decisions and agreements made about funding levels. In recent years, the relative share of Australian Government funding directed towards primary health care has increased while the share directed towards hospitals has decreased. Between 2001–02 and 2003–04, for every \$1 the Australian Government spent on hospitals, it spent on average \$0.97 on primary health care. In 2011–12, the Australian Government spent around \$1.16 on primary health care for every \$1 it provided for hospitals. In contrast, the state and territory governments increased the share of their recurrent expenditure allocated to hospitals from 63.0% to 69.0% over the decade and decreased the share allocated to primary health care from 29.1% to 21.4%.

Between 2001–02 and 2011–12, total growth in state and territory government funding for hospitals (\$11.5 billion) was almost double (1.8 times) that of the Australian Government (\$6.2 billion) and 2.4 times non-government expenditure growth (\$4.8 billion).

Expenditure trends also varied between the states and territories. Western Australia had the largest growth in state government funding for hospitals, more than doubling (2.16 times) its expenditure on hospitals between 2001–02 and 2011–12. Average annual growth in Victoria (4.3%) and New South Wales (4.8%) was below the national average of 5.6%.

The Northern Territory went from having the lowest Australian Government funding on health per person in 2001–02 (\$1,697) to the highest in 2011–12 (\$3,379). Western Australia had the slowest growth in Australian Government funding per person. In 2011–12, Western Australia had the lowest Australian Government expenditure at \$2,270 per person (\$350 lower than the national average).

Per person health expenditure by the Western Australia government was 2.5 times larger in 2011–12 (\$2,219) than in 2001–02 (\$891). South Australia, the Northern Territory and the Australian Capital Territory also more than doubled their per person expenditure between 2001–02 and 2011–12. Non-government expenditure was the highest in Victoria in both 2001–02 (\$1,550 per person) and 2011–12 (\$2,165 per person). In 2001–02, the Northern Territory was \$393 per person below the national average while in 2011–12 it was \$596 per person below the national average.

1 Introduction

This report has been produced as a companion to *Health expenditure Australia 2011–12*. *Health expenditure Australia 2011–12* focused on a national overview of health expenditure trends, whereas this report explores expenditure on specific areas of health: hospitals, primary health care, other recurrent expenditure and capital expenditure (see Box 1.1).

Box 1.1: Broad areas of health expenditure

Hospitals

Hospitals expenditure includes recurrent (see Glossary) spending on health goods and services provided by public and private hospitals. It includes services provided to a patient who is receiving admitted patient services or non-admitted patient services in a hospital, but *excludes* dental services, community health services, patient transport services, public health activities and health research undertaken within the hospital. It can include services provided off-site, such as hospital-in-the-home, dialysis or other services.

Primary health care

Primary health care expenditure includes recurrent expenditure on health goods and services such as medical services, dental services, other health practitioner services, pharmaceuticals and community and public health services. Primary health care services are delivered in numerous settings such as general practices, community health centres, allied health practices (for example, physiotherapy, dietetic and chiropractic practices, tele-health) and under numerous funding arrangements.

Other recurrent expenditure

Other recurrent expenditure includes recurrent expenditure on health goods and services such as medical specialists services (those non-hospital medical services that have not been classified as primary health care), health research, administration, patient transport services and medical aids and appliances.

Capital expenditure

Capital expenditure includes expenditure on fixed assets (for example, new buildings and equipment with a useful life that extends beyond 1 year). This does not include changes in inventories. This term is used in this publication to refer to what the Australian Bureau of Statistics (ABS) calls 'gross fixed capital formation'.

See Appendix B for more information on the allocation of medical services expenditure to primary health care and other recurrent expenditure.

In examining expenditure on these areas over the past decade (from 2001–02 to 2011–12), this report analyses trends in the source of funds, such as the Australian Government, state and territory and local governments and non-government sources, which includes private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

The main data source for this report is the AIHW's Health expenditure database, which is collated annually using data from a wide range of sources, including:

- the Australian Government from agencies such as the Department of Health, the Department of Veterans' Affairs (DVA) and the ABS

- State and territory governments through the Government Health Expenditure National Minimum Dataset
- the Private Health Insurance Administration Council
- other research collections.

The tables and figures in this publication provide expenditure primarily in constant prices. Constant price expenditure adjusts for the effects of inflation using either annually re-weighted chain price indexes produced by the ABS, or implicit price deflators (IPDs) produced by the ABS or AIHW. Because the reference year for both the chain price indexes and the IPDs is 2011–12, the constant price estimates indicate what expenditure would have been had 2011–12 prices applied in all years.

The analysis includes both recurrent and capital expenditure, as appropriate. See Box 1.1 for definitions of each of the broad areas of health expenditure.

More information on the data sources used or the methods for developing the AIHW's Health expenditure database can be found in *Health expenditure Australia 2011–12* or on the AIHW's website <www.aihw.gov.au/expenditure/>. A data quality statement for the health expenditure database is available at: <<http://meteor.aihw.gov.au/content/index.phtml/itemId/540775>>.

1.1 Structure of this report

Chapter 2 presents an overview of current trends in health spending, broken down into spending on hospitals, primary health care, other areas of health spending and capital expenditure.

Chapter 3 presents an analysis of hospitals expenditure by source of funds for each state and territory.

Chapters 4 and 5 present similar analysis for primary health care and all other areas of health spending, respectively.

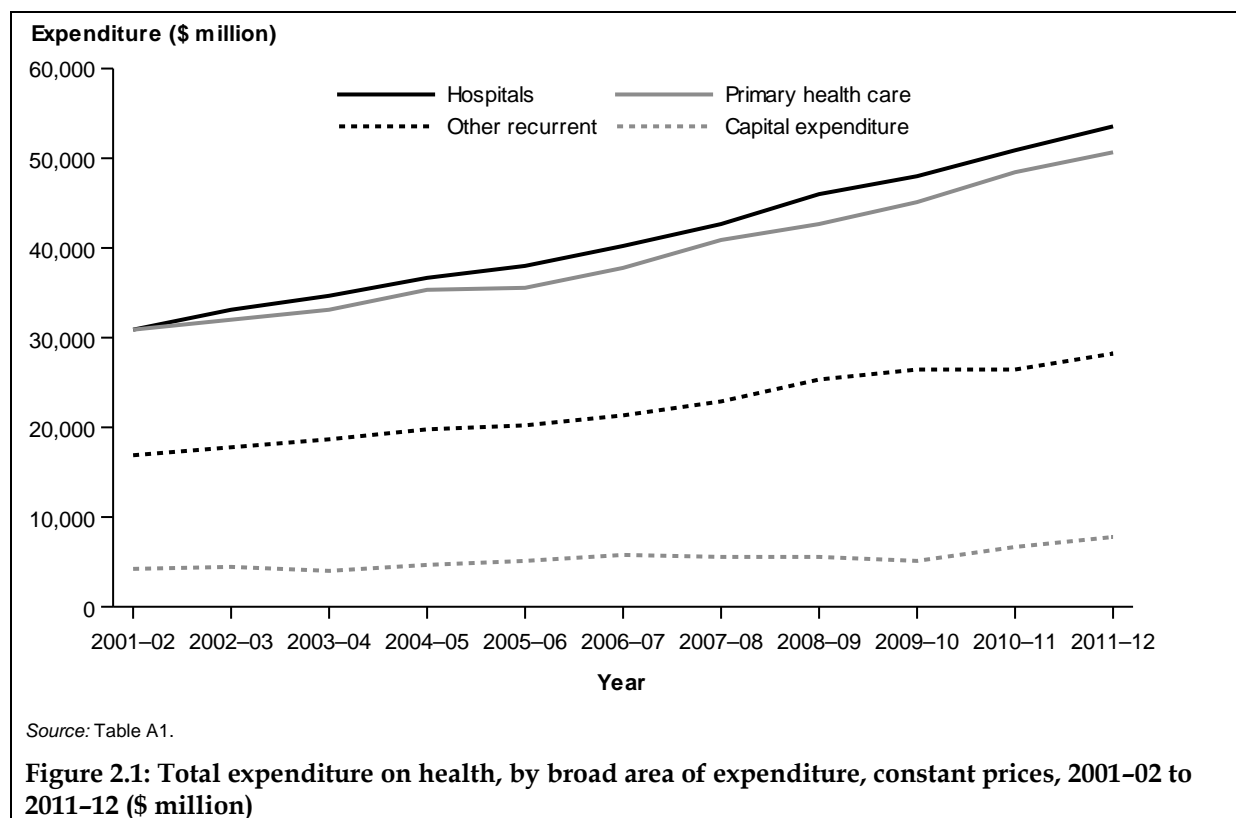
Appendix A presents all of the source tables for figures in this report.

Appendix B presents the technical notes for this report.

2 Overview of trends in health expenditure

2.1 National comparisons

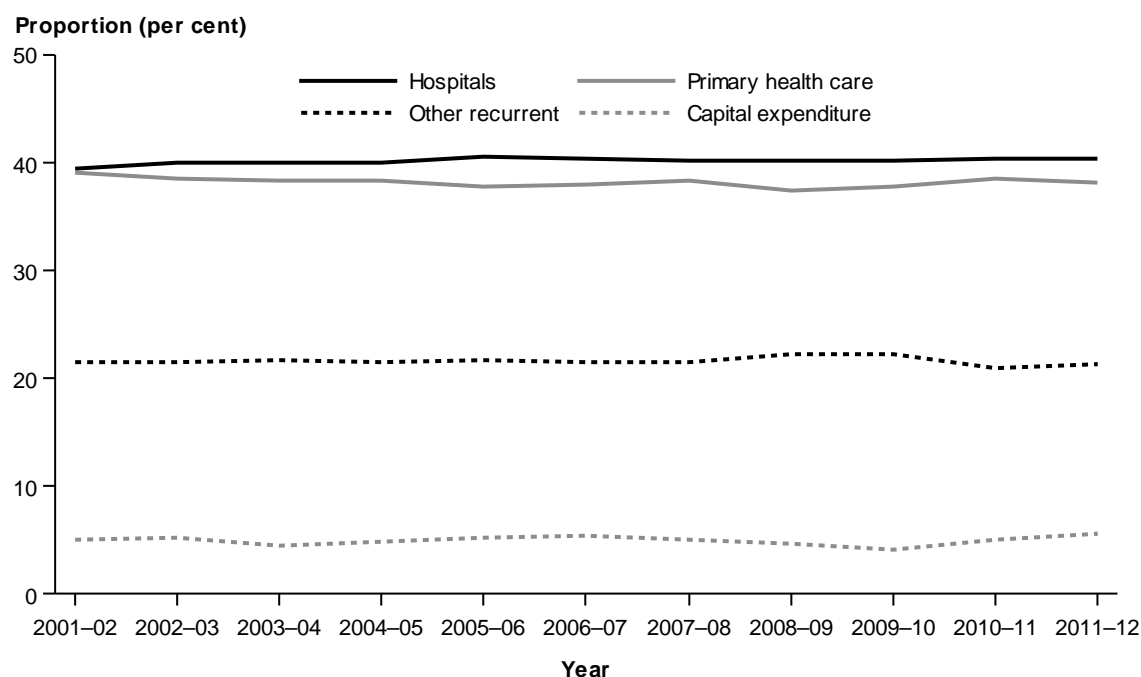
Over the decade from 2001–02 to 2011–12, expenditure increased for all areas, however, the growth rates for each area were different (Figure 2.1).



The different growth rates are reflected in the share of expenditure allocated to each sector, with the most variation occurring in hospitals and primary health care. Between 2001–02 and 2005–06, the share of recurrent expenditure attributed to hospitals increased from 39.4% to 40.6% (Table A1; Figure 2.2 and AIHW 2013b). The share for primary health care decreased over this time from 39.1% to 37.8%. Both, however, have shown no clear trend since then, with hospitals ending the period at 40.4% and primary health care at 38.2% (Table A1 and Figure 2.2).

The share of recurrent spending on other areas varied only slightly between 2001–02 and 2007–08, staying at around 21.5%. Since then, there has been more variation, with a peak in 2008–09 of 22.3% and a drop back to 21.3% in 2011–12.

Capital expenditure at the beginning of the reporting period represented 5.0% of total expenditure. At the end of the period it was at its highest proportion, at 5.6%.



Source: Table A1.

Figure 2.2: Share of expenditure on health, by broad area of expenditure, constant prices, 2001-02 to 2011-12 (%)

The remainder of this chapter examines, in turn, the funding of health care by the Australian Government, state and territory governments and the non-government sector.

The flow of money around the Australian health-care system is complex and is determined by the institutional frameworks in place, both government and non-government. Box 2.1 defines government and non-government funding for the Australian health-care system.

Box 2.1: Government and non-government funding of health care

The **government sector** includes the Australian and state and territory governments and, in some jurisdictions, local government.

Australian Government funding comprises total expenditure incurred by the Australian Government on its own health programs, including funding provided to the states and territories by way of grants under section 96 of the Constitution. It also includes the 30-40% private health insurance premium rebates.

State and territory government funding comprises total expenditure incurred by the state and territory governments on their own health programs. It does not include the funding provided to the states and territories by the Australian Government or other sources.

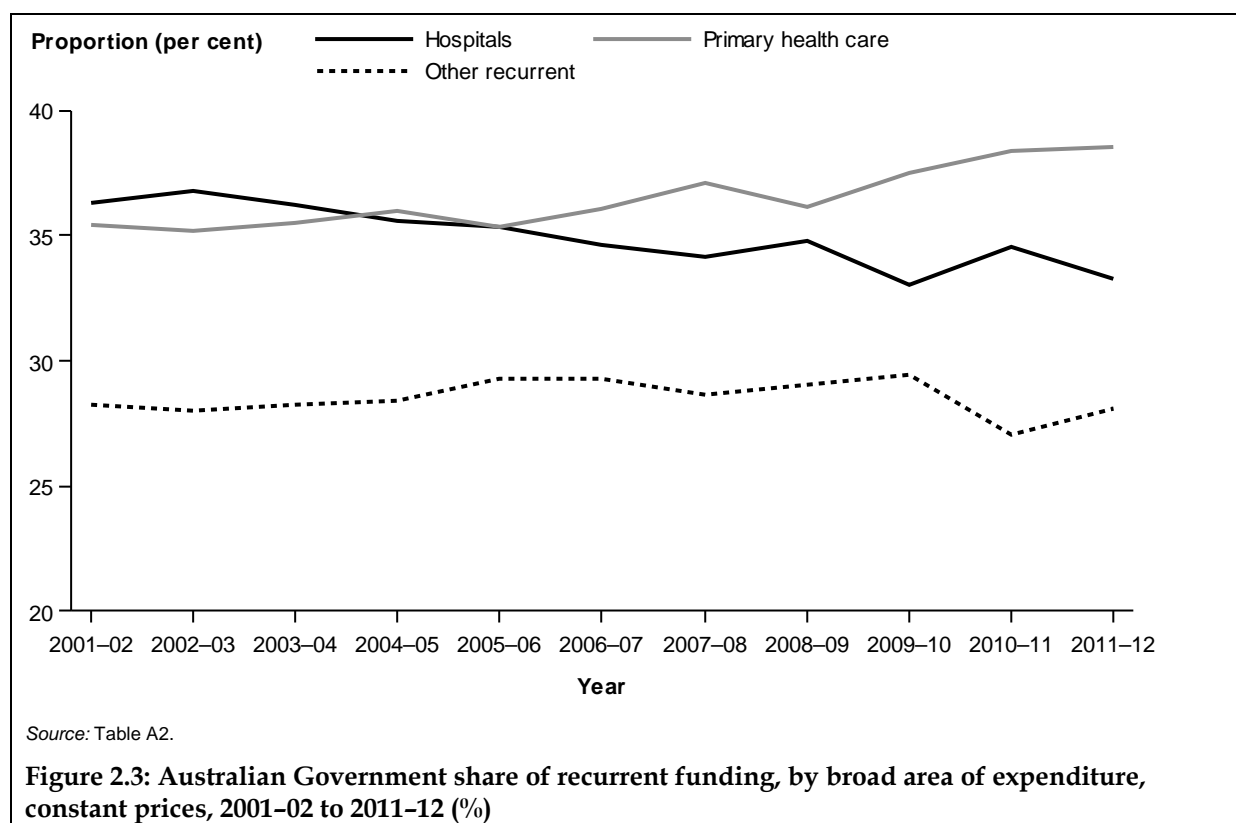
Non-government funding comprises funding from private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

Australian Government funding

Between 2001–02 and 2003–04, for every \$1 the Australian Government spent on hospitals, it spent on average \$0.97 on primary health care. Since 2003–04 the ratio of Australian Government spending on primary health care compared with hospitals has gradually increased. In 2011–12, the Australian Government spent around \$1.16 on primary health care for every dollar provided to the states and territories for hospitals (Table A2).

Between 2001–02 and 2009–10, Australian Government funding for other areas of health increased from \$10.3 billion to \$15.9 billion; however the share of funding remained relatively stable at around 28%. In 2010–11, the share of funding decreased to 27.0% before increasing again to 28.1% in 2011–12 (Table A2 and Figure 2.3).

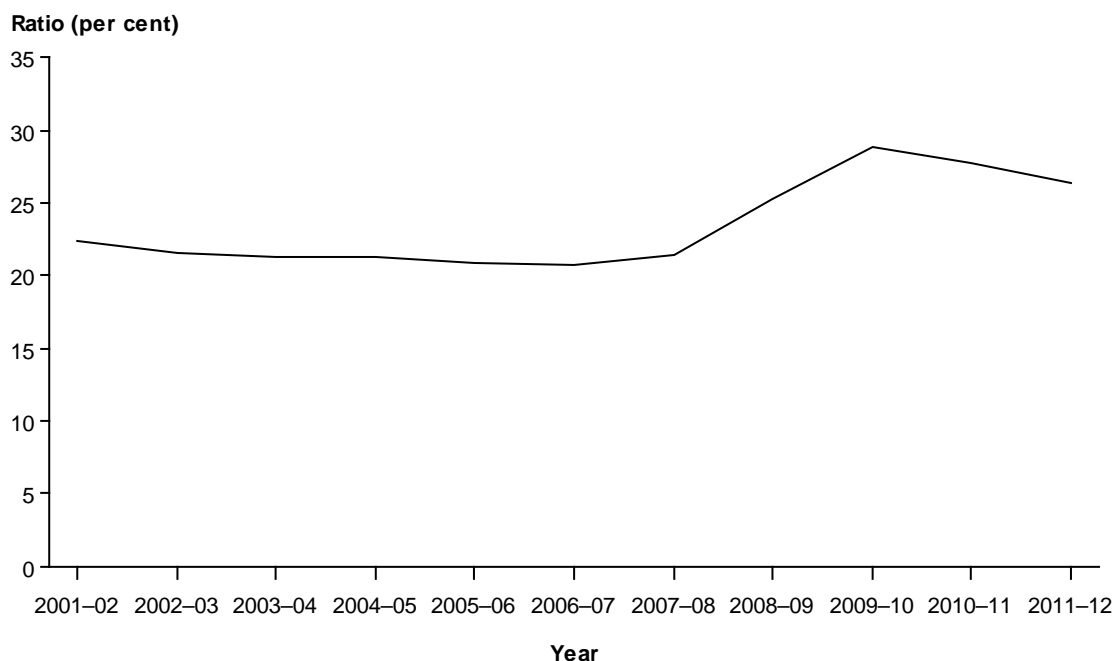
Capital expenditure by the Australian Government increased in real terms from \$84 million in 2001–02 to \$336 million in 2011–12. For each year across the decade 2001–02 to 2011–12, less than 1% of Australian Government funding for health was capital expenditure (Table A2).



Australian Government expenditure as a ratio of tax revenue

As reported in *Health expenditure Australia 2011–12*, the ratio of Australian Government expenditure on health to tax revenue was 22.3% in 2001–02. This ratio steadily declined to 21.2% in 2007–08 (Figure 2.4 and Table A3).

A drop in tax revenue following the global financial crisis (GFC) caused the ratio to increase to 25.0% in 2008–09 and to 28.6% in 2009–10. The ratio declined in the next 2 years to 27.5% in 2010–11 and 26.2% in 2011–12.



Source: Table A3.

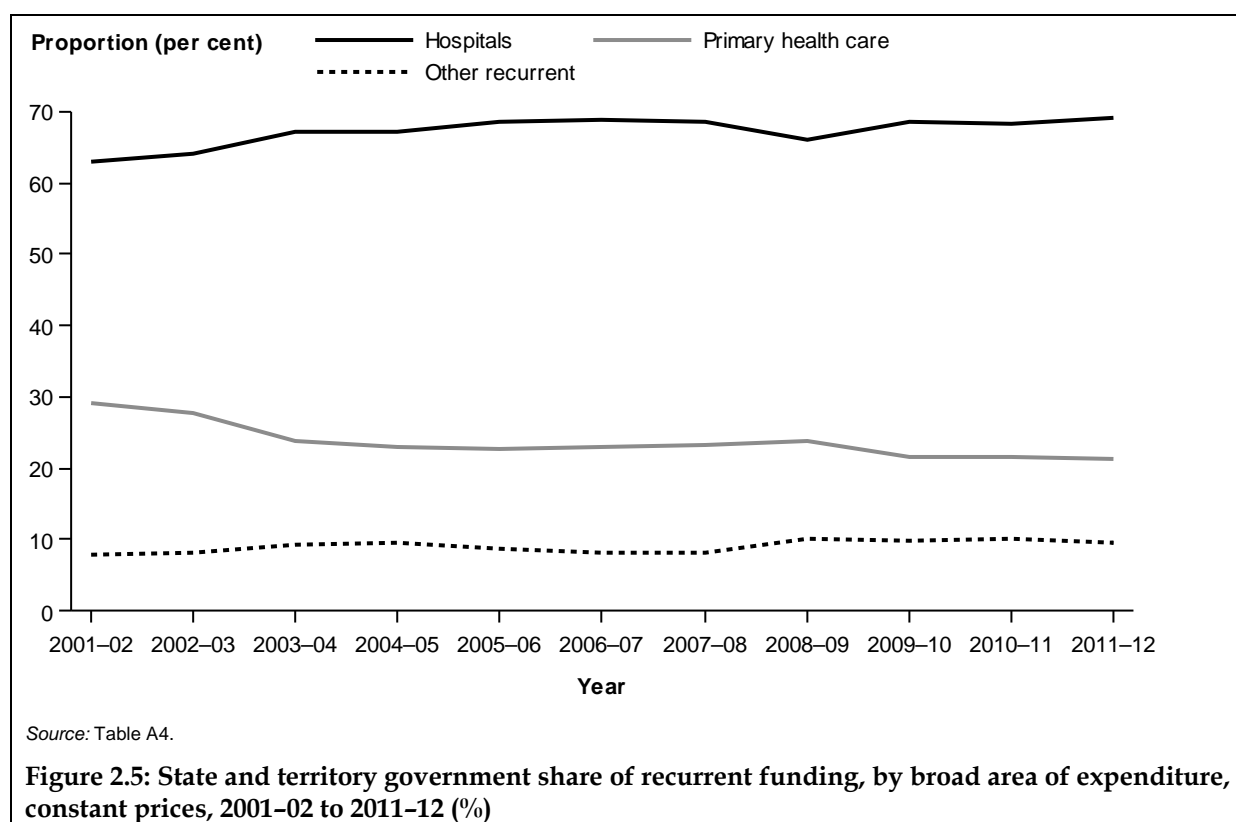
Figure 2.4: The ratio of health expenditure to tax revenue for the Australian Government, current prices, 2001-02 to 2011-12 (%)

State and territory government expenditure

The state and territory governments generally increased the share of their recurrent expenditure allocated to hospitals over the period 2001-02 to 2011-12, while reducing the share spent on primary health care. The hospitals share of recurrent spending increased from 63.0% to 69.0%, while the primary health care share fell from 29.1% to 21.4% over this period (Table A4 and Figure 2.5).

The share allocated to 'other' areas (i.e. other than hospitals and primary health care) varied far less than either hospitals or primary health care shares and the trend was less clear. It began the period at 8.0% and ended it at 9.6% but growth was not consistent over time (Table A4 and Figure 2.5).

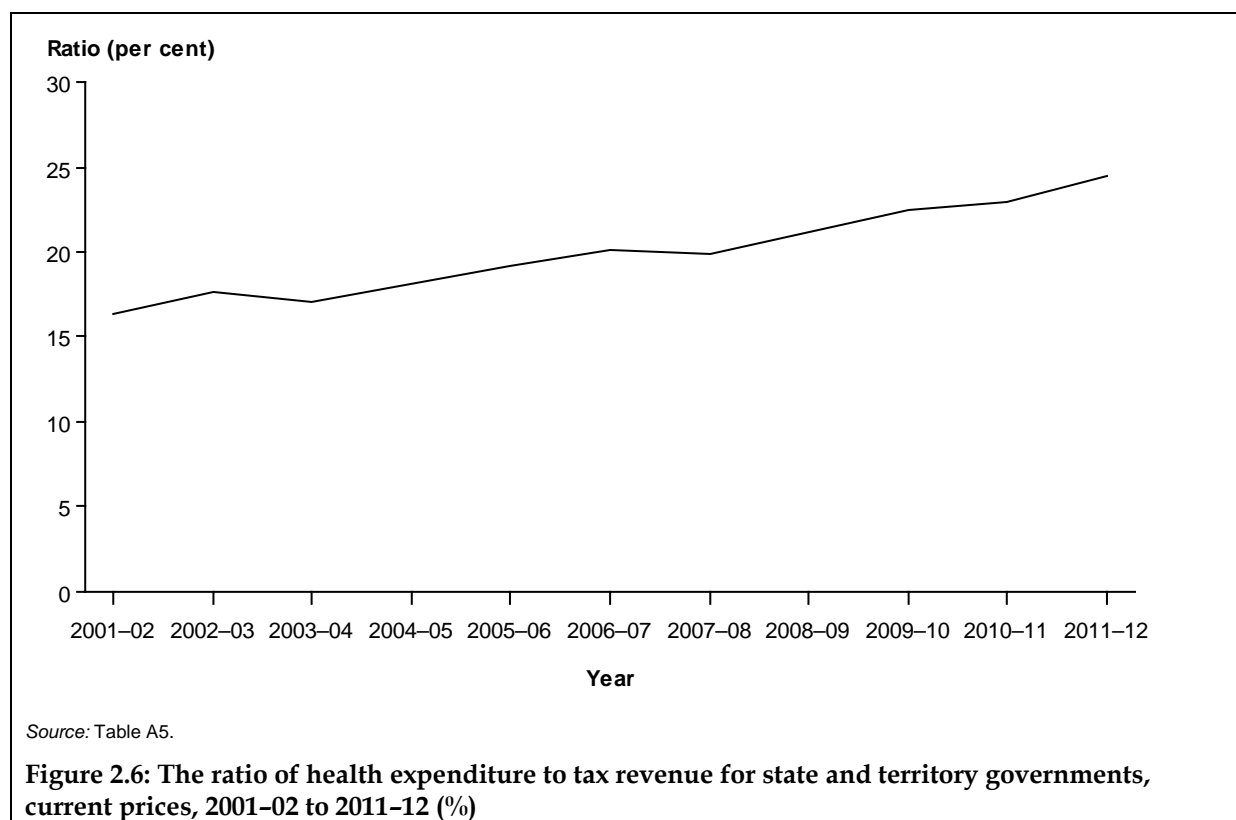
The ratio of capital to total health spending remained relatively stable at around 8% between 2001-02 and 2009-10. However, it increased to 11.9% in 2010-11 and 13.3% in 2011-12 (Table A4).



State and territory government expenditure as a ratio of tax revenue

The ratio of state and territory government expenditure to tax revenue rose from 16.4% in 2001-02 to 17.7% in 2002-03, before declining to 17.0% in 2003-04. By 2006-07, this ratio had risen to 20.1%. At the time of the GFC, the ratio rose to 21.2% in 2008-09 before further gradual increases to 24.5% in 2011-12 (Table A5 and Figure 2.6).

An analysis of the ratio of state and territory government funding on health to tax revenue is also discussed in Chapter 2 of *Health expenditure Australia 2011-12* (AIHW 2013b).



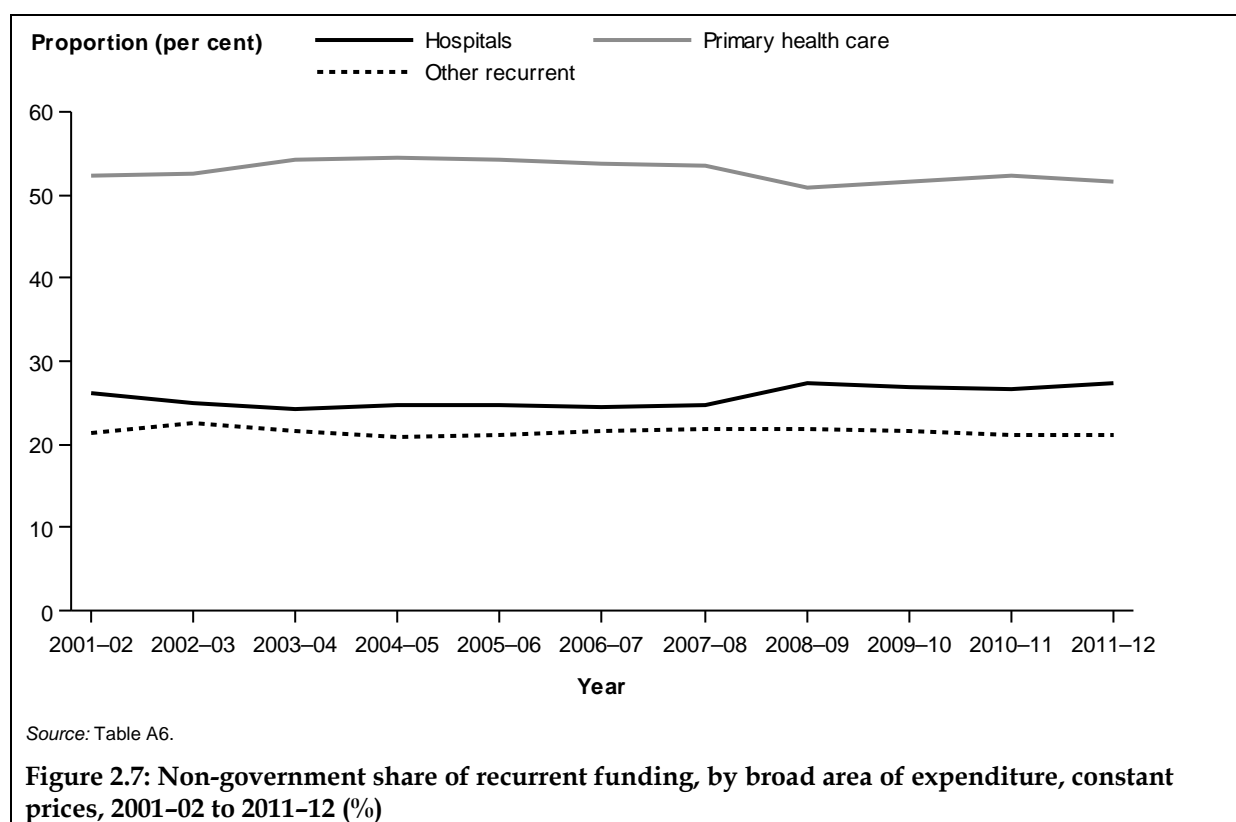
Non-government funding

After increasing between 2001-02 and 2004-05 from 52.4% to 54.5%, the share of non-government spending attributed to primary health care dropped to a low of 50.8% in 2008-09. It ended the period at 51.5% in 2011-12 (Table A6 and Figure 2.7).

The share of non-government spending attributed to hospitals fell from 26.3% in 2001-02 to 24.2% in 2003-04. It then stayed at around 25% until 2008-09, at which point it rose to a high of 27.4%. It ended the period at 27.3% (Table A6 and Figure 2.7).

The share of non-government spending attributed to other areas of spending began the period at 21.3% and ended the period at 21.2%; however during that time it varied from a low of 20.9% in 2004-05 to a high of 22.5% in 2002-03 (Table A6 and Figure 2.7).

The remainder of non-government spending was for capital expenditure. In 2001-02, 9.0% of total non-government spending was attributed to capital expenditure. This share increased to a high of 10.1% in 2006-07 and 2007-08 and has since declined to a low of 5.6% in 2011-12 (Table A6).



2.2 Funding comparisons across jurisdictions

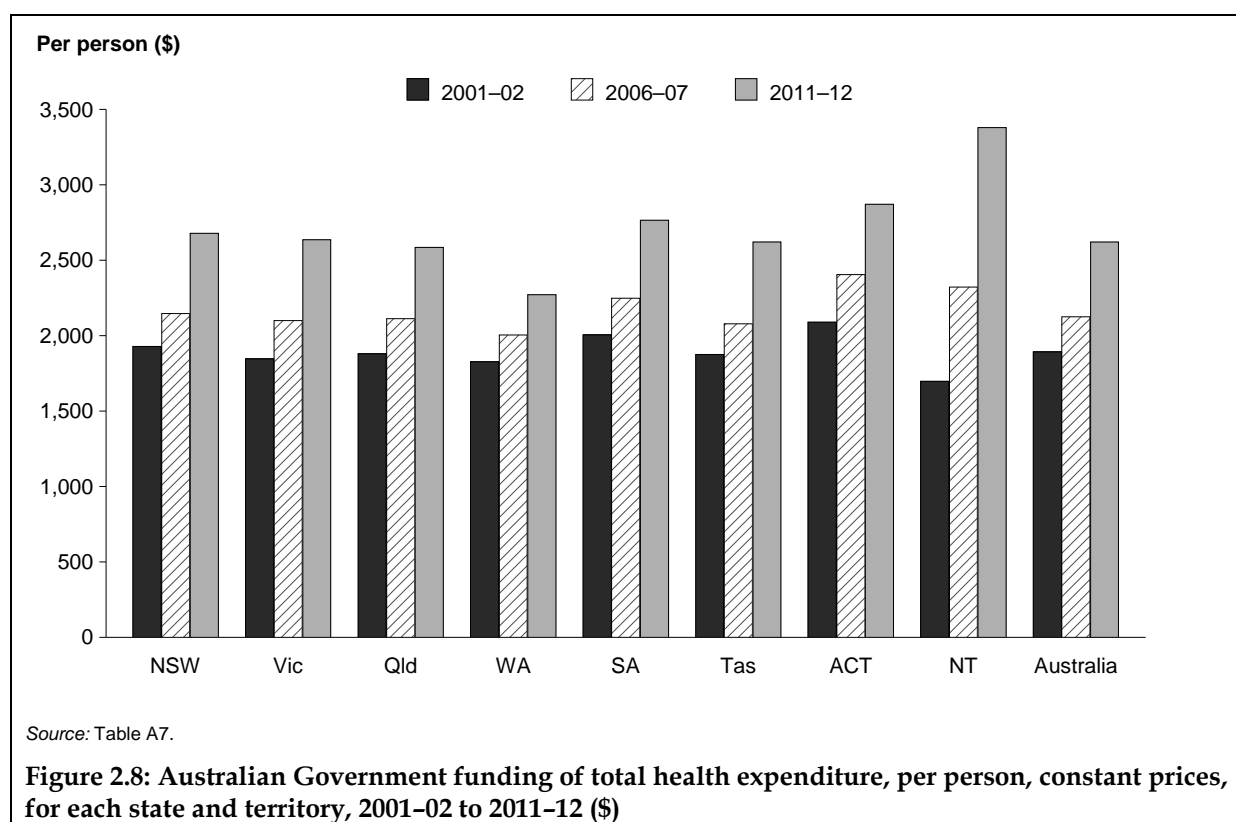
Australian Government funding

Australian Government funding per person varies across jurisdictions for a number of reasons including socioeconomic and demographic profiles as well as variable accessibility to health services due to remoteness (AIHW 2013a). The Australian Government also implements specific health policies that can affect the per person expenditure in jurisdictions differently.

Australian Government funding has risen in all states and territories over the past decade. In 2011-12, the estimated Australian Government funding per person on health averaged \$2,620, which was \$728 more in real terms than in 2001-02 (Table A7 and Figure 2.8).

Over the past decade, Australian Government funding grew the fastest in the Northern Territory. The Northern Territory went from having the lowest Australian Government funding per person in 2001-02 (\$1,697) to the highest in 2011-12 (\$3,379).

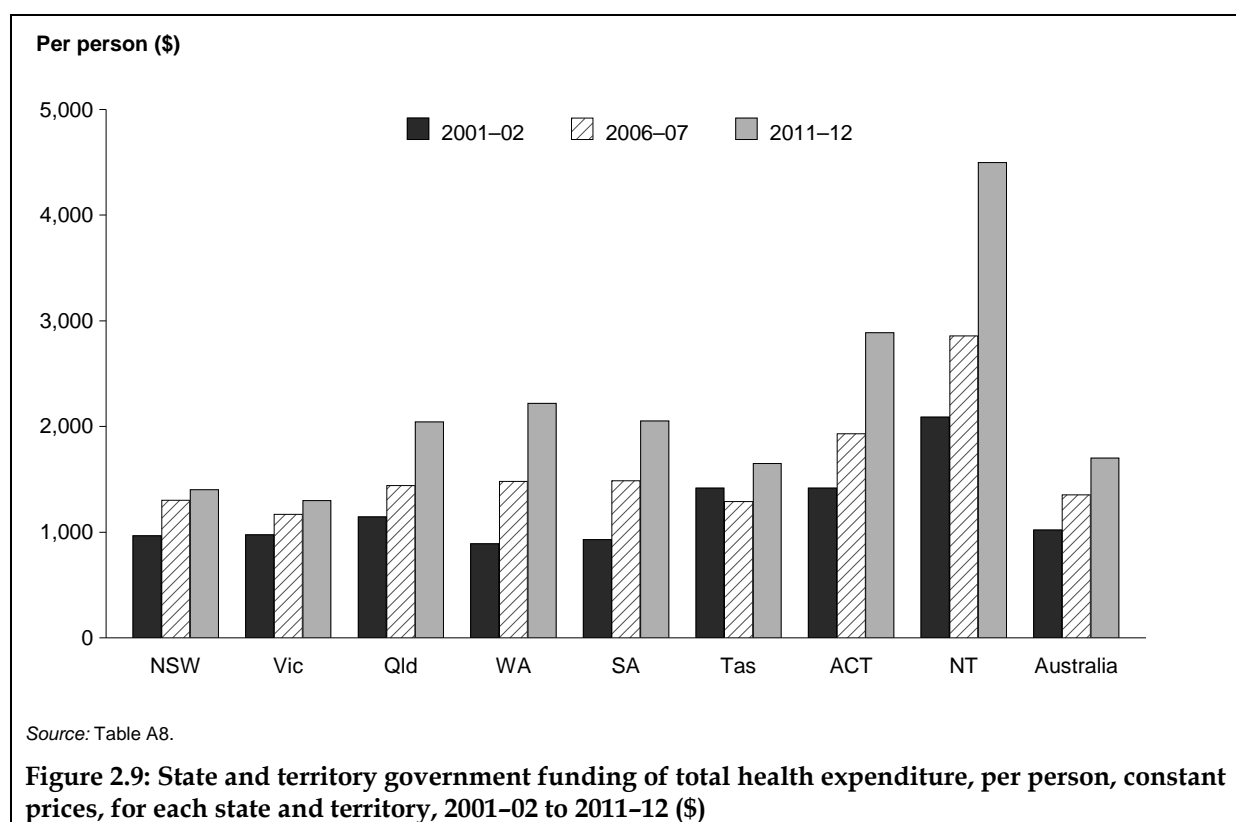
Western Australia had the slowest growth in Australian Government funding per person, with an average growth rate of 2.2% over the decade, compared with growth of 3.3% nationally. In 2011-12, Western Australia had the lowest Australian Government funding at \$2,270 per person, which was \$350 lower than the national average and \$315 below the next lowest state (Queensland at \$2,585 per person).



State and territory government funding

All state and territory governments increased their health funding over the decade in real terms. This increase in per person state and territory government funding between 2001-02 (\$1,022) and 2011-12 (\$1,701) was \$679 (Table A8 and Figure 2.9).

Western Australia had the largest growth in state and territory government health funding. Per person expenditure in Western Australia in 2011-12 (\$2,219) was 2.5 times per person expenditure in 2001-02 (\$891). South Australia, the Northern Territory and the Australian Capital Territory also more than doubled their per person expenditure between 2001-02 and 2011-12.

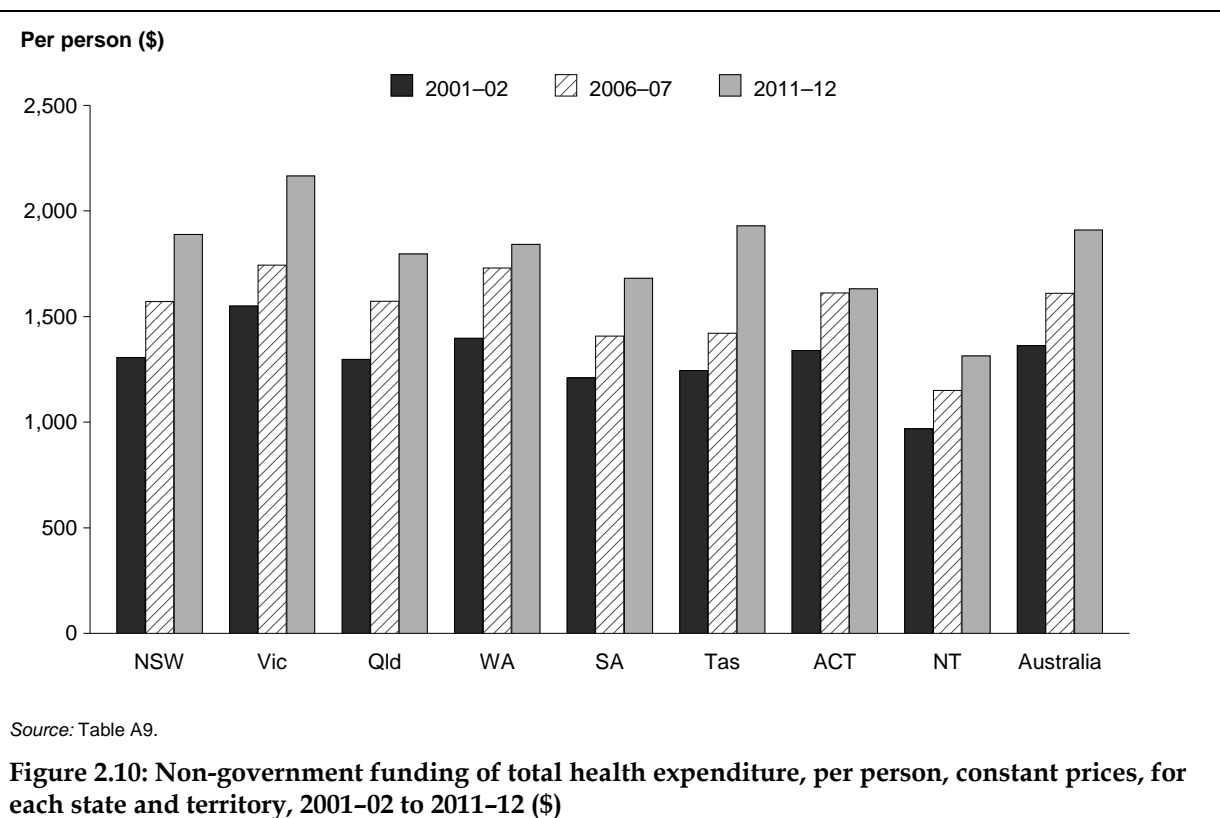


Non-government funding

Non-government funding of total health expenditure per person in 2011-12 was \$1,909 nationally, which was \$548 more than in 2001-02 (Table A9 and Figure 2.10).

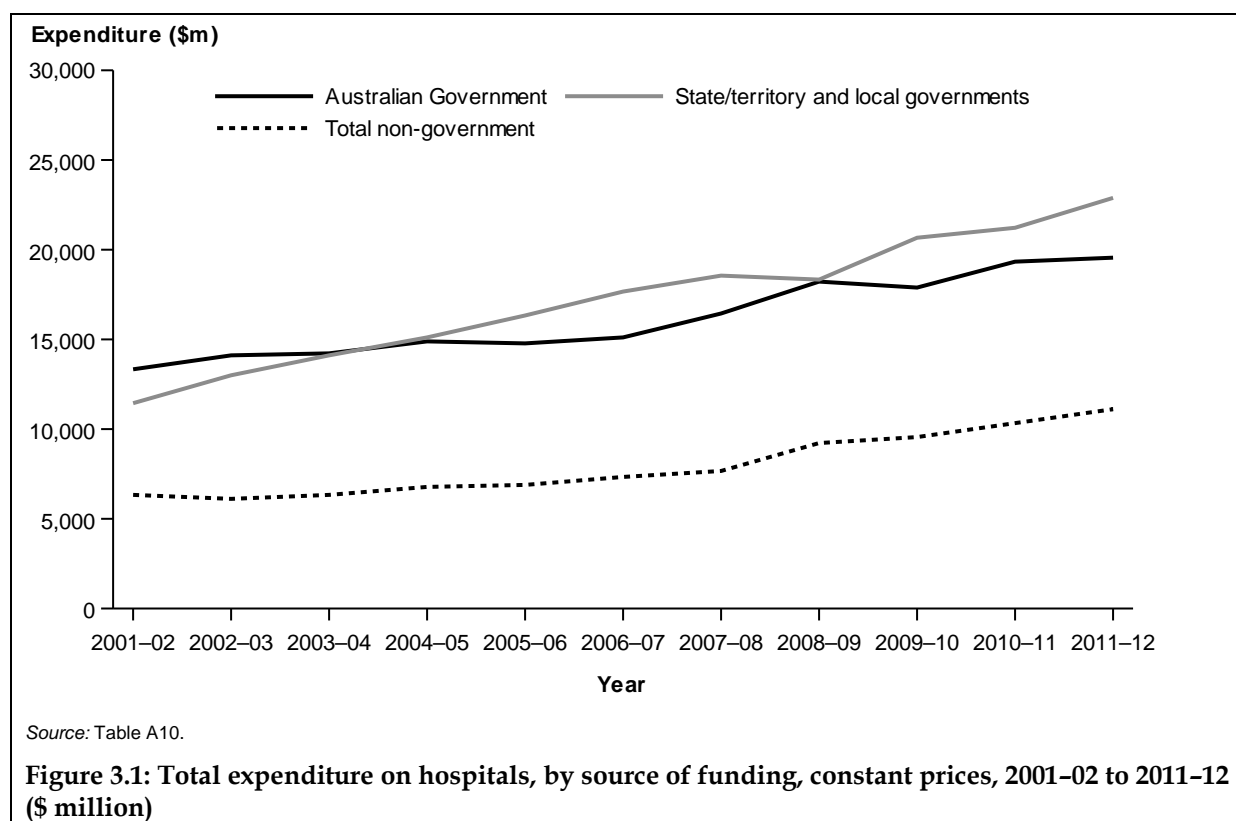
Victoria had the highest per person non-government health expenditure in both 2001-02 (\$1,550 or \$189 above the national average) and 2011-12 (\$2,165 or \$256 above the average).

Non-government expenditure per person in the Northern Territory stayed well below the national average throughout the period and the gap widened over time. In 2001-02, non-government expenditure in the Northern Territory was \$393 per person below the national average. In 2011-12, it was \$596 per person below the average.



3 Hospitals

All funders increased their expenditure on hospitals between 2001–02 and 2011–12 (Table A10 and Figure 3.1). Total growth in state and territory government funding (\$11.5 billion) was almost double (1.8 times) that of the Australian Government (\$6.2 billion) and 2.4 times the growth of non-government expenditure (\$4.8 billion).



3.1 Australian Government funding

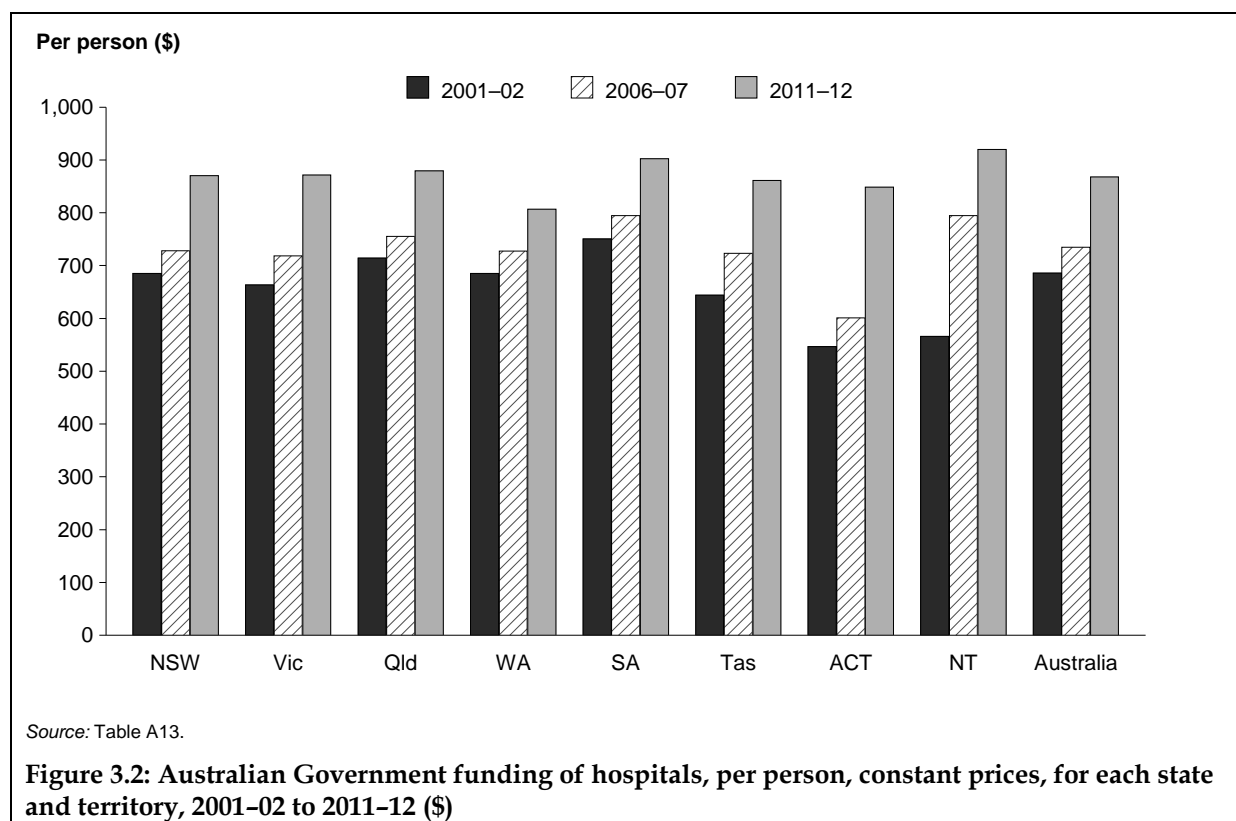
The Australian Government funding for hospitals in 2011–12 was \$868 per person Australia-wide, which was \$182 higher than in 2001–02 (Table A13 and Figure 3.2).

The Northern Territory had the largest growth in Australian Government funding for hospitals per person over the decade 2001–02 to 2011–12 at 5.0%, on average, per year. The Northern Territory received the second lowest contribution from the Australian Government for hospitals in 2001–02 at \$566 per person (\$120 below the national average). In 2011–12, the Northern Territory received the largest contribution at \$920 per person (\$52 above the national average).

The Australian Capital Territory received the lowest contribution for hospitals per person from the Australian Government in all years except 2011–12, but experienced the second largest growth over the period.

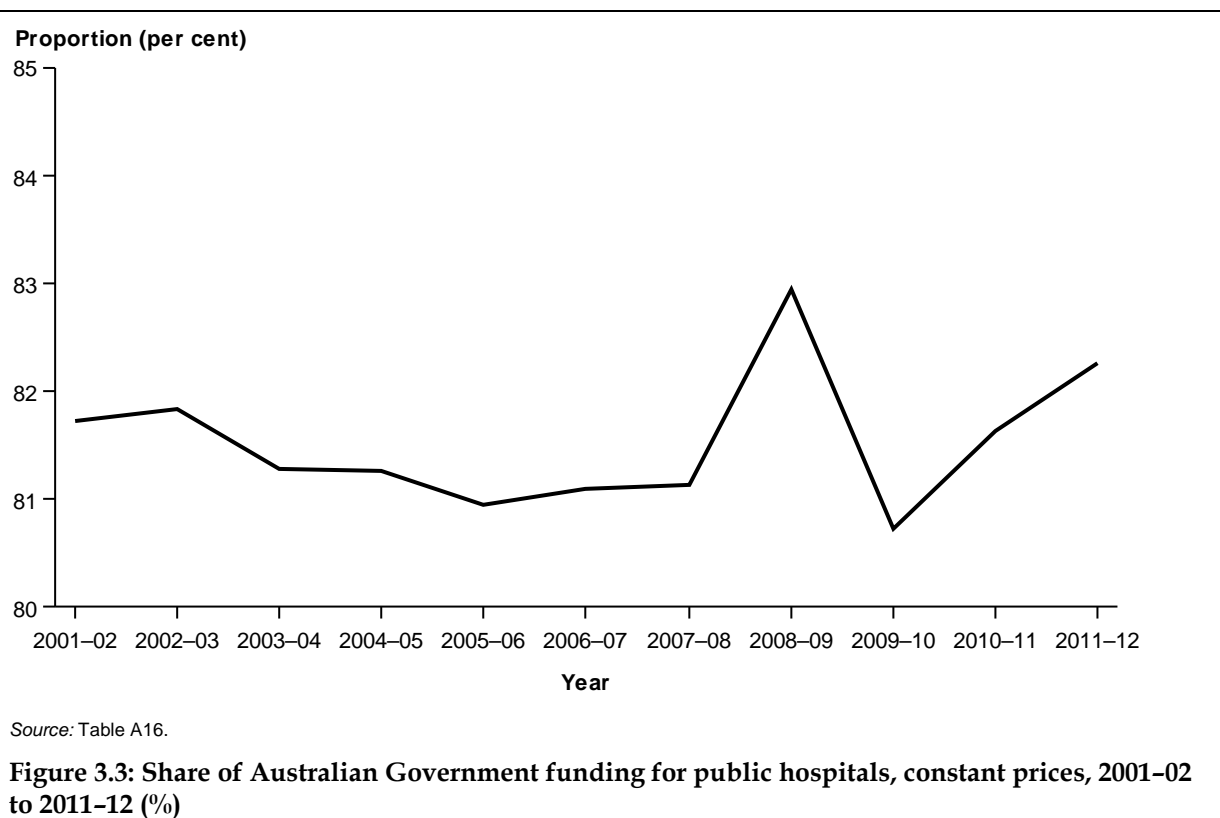
Western Australia experienced the lowest growth in Australian Government funding for hospitals, increasing by 1.18 times compared with a national growth of 1.27. In 2011–12,

Western Australia received the lowest amount of funding per person from the Australian Government of any jurisdiction.



Public versus private hospital Australian Government funding

The Australian Government provided \$13.3 billion of funding for hospitals in 2001-02, which comprised \$10.9 billion (81.7%) for public hospitals and \$2.4 billion for private hospitals (18.3%). The share of Australian Government funding provided for public hospitals gradually declined over the next 6 years to 81.1% in 2007-08. In 2008-09, following the GFC, there was an increase of \$1.8 billion in Australian Government funding for public hospitals, which represents an increase in the share it contributed to 82.9%. The injection of funds in 2008-09 has been followed by a more variable funding profile by the Australian Government for public hospitals (Table A16 and Figure 3.3).



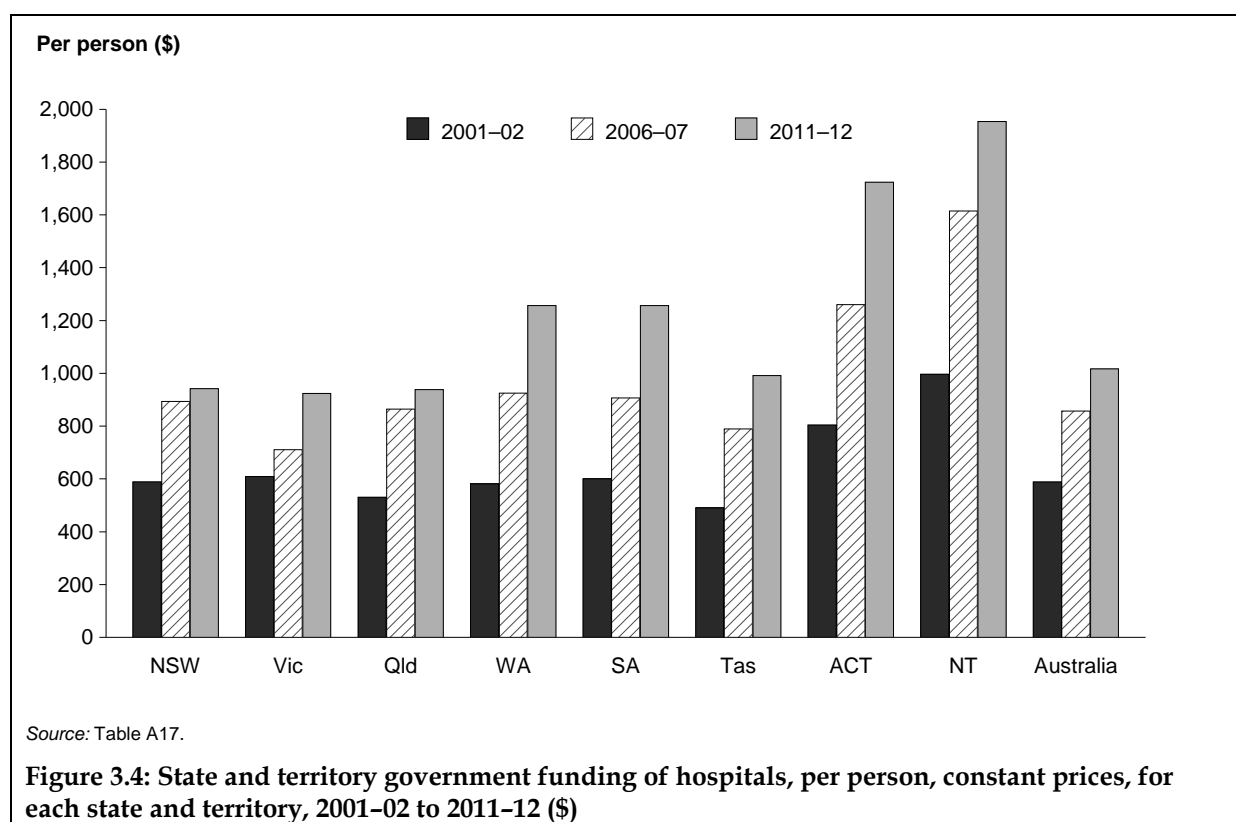
3.2 State and territory government funding

In 2011-12, the average per person state and territory government funding for public and private hospitals was \$1,017, a \$429 increase from 2001-02 (Table A17 and Figure 3.4).

The Northern Territory and the Australian Capital Territory governments spent relatively higher amounts of money on hospitals per person throughout the decade. In 2011-12, the Northern Territory had the highest per person state and territory expenditure on hospitals at \$1,953, which was \$936 higher than the national average. The Australian Capital Territory was the second highest at \$1,724, which was \$467 more than the next highest, Western Australia.

Western Australia had the largest growth in hospital expenditure, more than doubling (2.16 times) its expenditure on hospitals between 2001-02 and 2011-12.

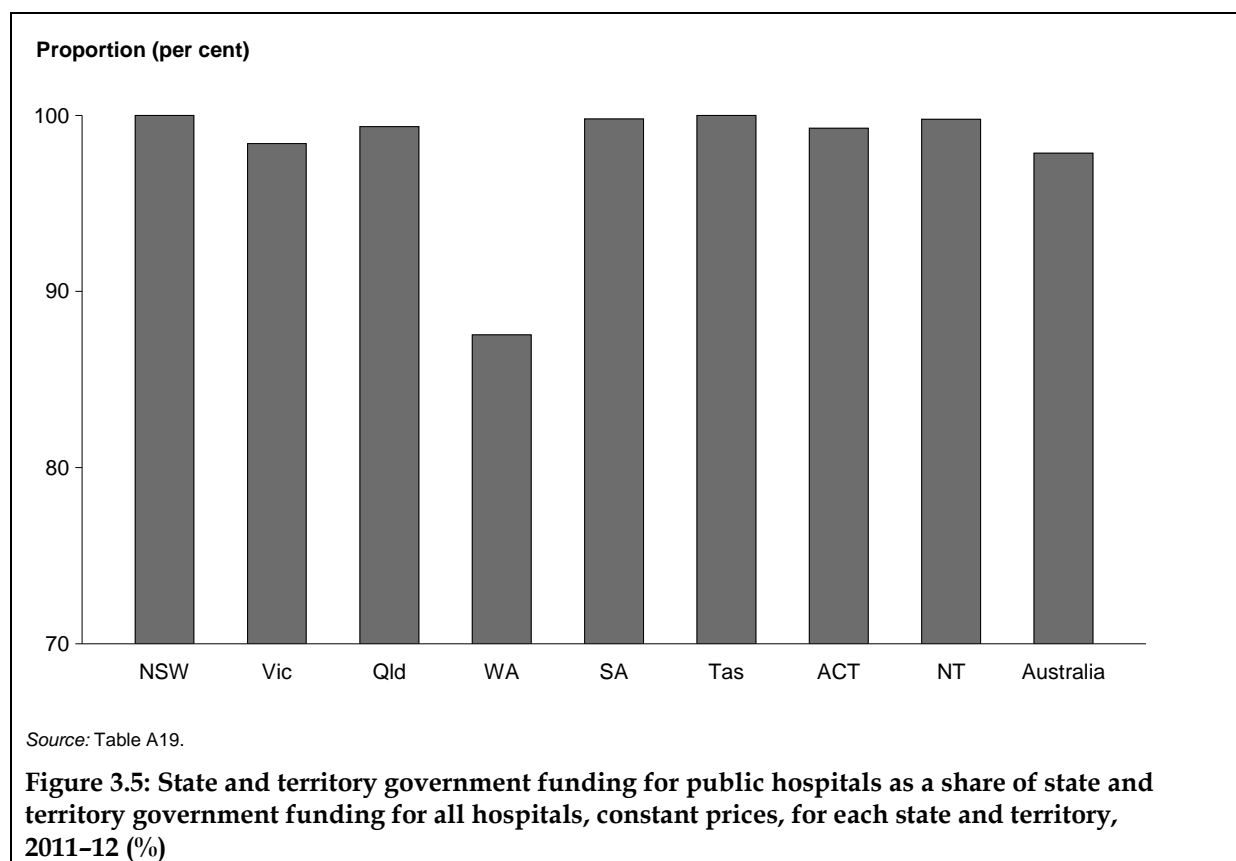
Victoria (4.3%) and New South Wales (4.8%) were the only jurisdictions to experience below average annual growth (5.6%) in their expenditure on hospitals over the period.



Public versus private hospital state and territory government funding by jurisdiction

In 2011-12, state and territory governments funded \$22.4 billion for public hospitals, which represented 97.8% of all state and territory government funding for hospitals (Table A19). This proportion did not change significantly over the previous decade.

For most states and territories, funding for public hospitals was close to 100% of hospital funding in 2011-12 and for most of the previous decade (Table A19 and Figure 3.5). Western Australia was an exception to this. Western Australia had the lowest share of state government funding for public hospitals each year between 2002-03 and 2011-12. In 2011-12, the share of state government funding for public hospitals in Western Australia was 87.5% (Figure 3.5 and Table A19).

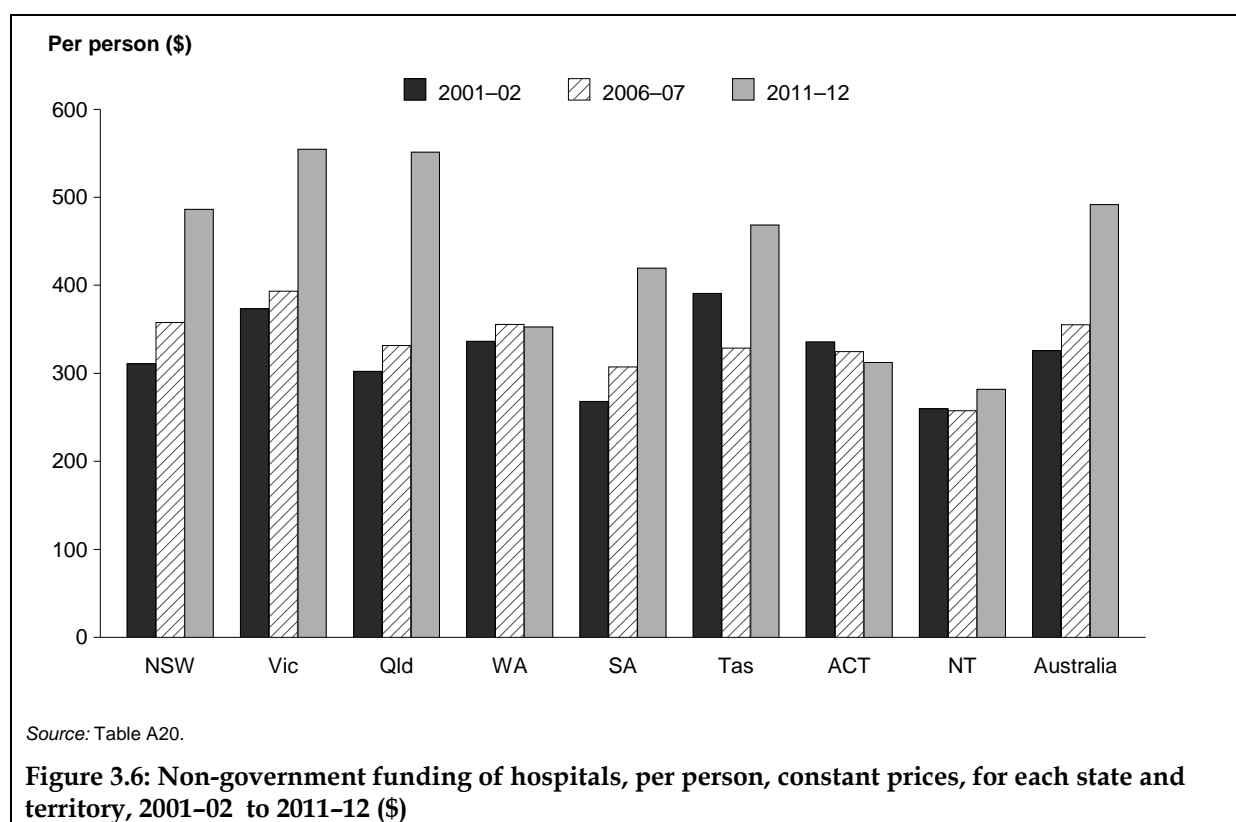


3.3 Non-government funding

In 2011-12, the average per person non-government health expenditure on hospitals was \$492, which had grown by \$166 per person since 2001-02 (Table A20 and Figure 3.6).

The Australian Capital Territory experienced a decline in real terms in non-government funding over the period of \$24 per person. Western Australia and the Northern Territory also had relatively low growth in non-government funding on hospitals over the period (\$17 and \$22, respectively).

Queensland had the largest growth, increasing by \$249 per person, with growth in New South Wales, Victoria and South Australia of 4.0% or higher each year.

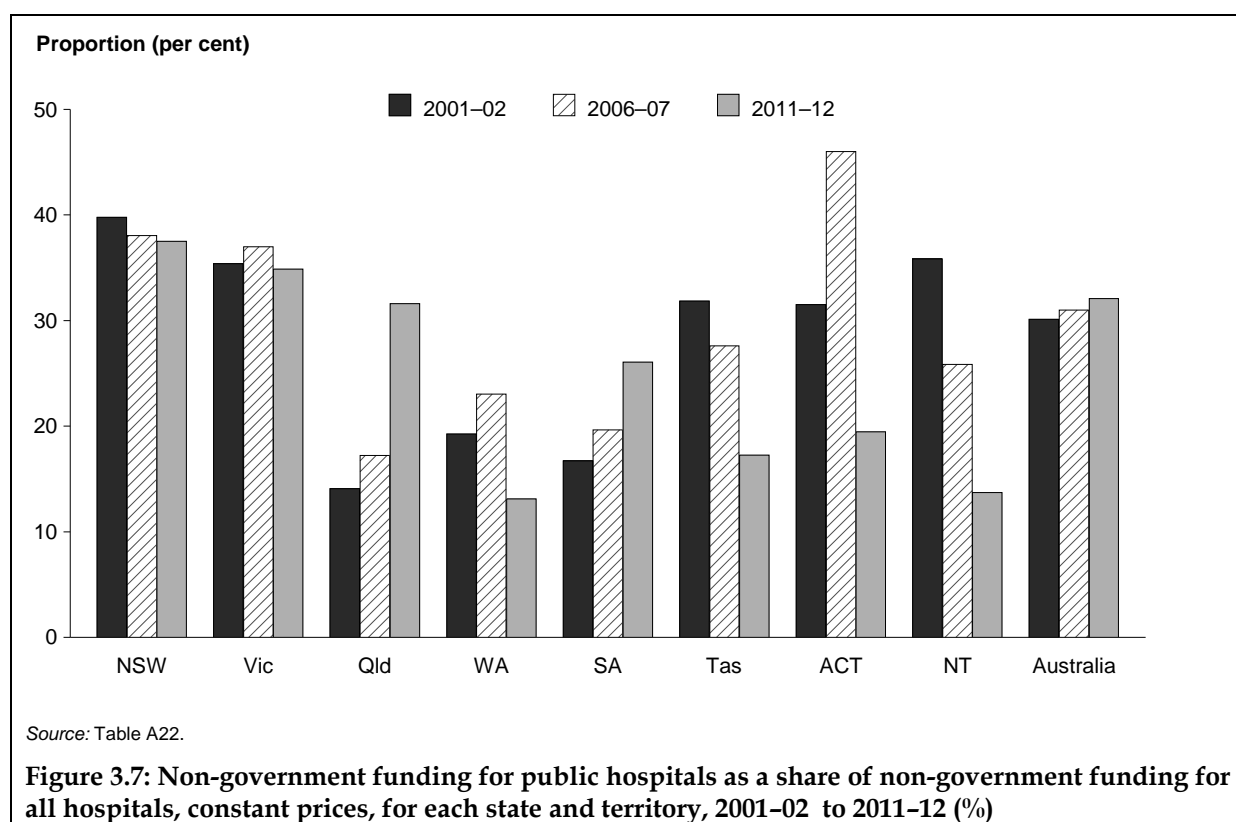


Public versus private hospital non-government funding by jurisdiction

In 2011-12, non-government funding for public hospitals was \$3.6 billion. Across the past decade, the non-government funding for public hospitals as a share of non-government funding for all hospitals, grew from 30.1% in 2001-02 to 32.1% in 2011-12 (Figure 3.7 and Table A22).

The share of non-government funding for public hospitals varied across the decade for each state and territory. Queensland had the lowest share of all states and territories in 2001-02, with just 14.1% of non-government funding for hospitals going to public hospitals. In 2011-02, this share had more than doubled to 31.6%, to be the third highest behind New South Wales (37.5%) and Victoria (34.9%) (Figure 3.7 and Table A22).

In contrast, non-government funding for public hospitals in the Northern Territory was 35.8% of all hospitals funding in 2001-02, and dropped to 13.7% in 2011-12 (Figure 3.7 and Table A22).



4 Primary health care

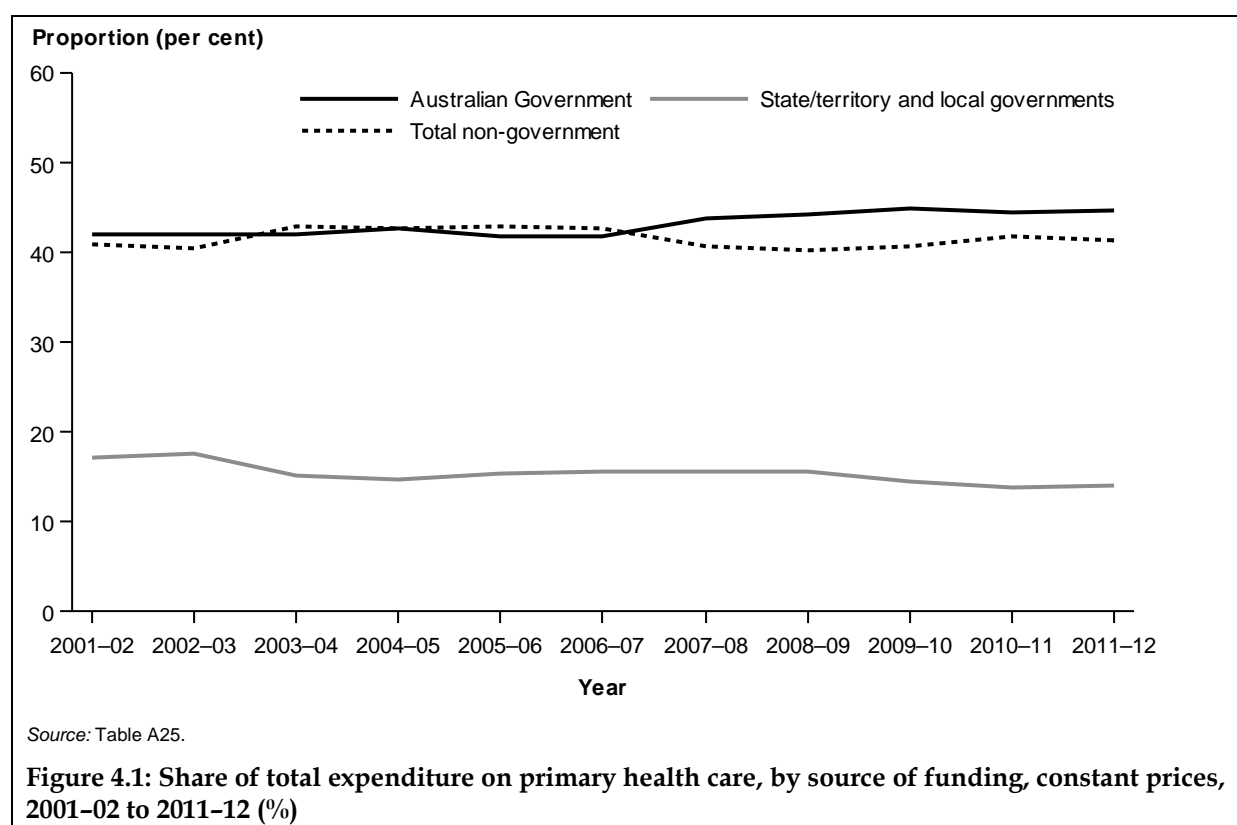
Primary health care services are delivered in numerous settings such as general practices, community health centres, allied health practices (for example, physiotherapy, dietetic and chiropractic practices and tele-health) and under numerous funding arrangements.

In 2011–12, \$50.6 billion was spent on primary health care in Australia, up from \$30.8 billion in 2001–02.

Over the most recent 5-year period, 2006–07 to 2011–12, total spending on primary health care grew from \$37.7 billion to \$50.6 billion. This was largely driven by an increase in Australian Government funding from \$15.8 billion to \$22.6 billion. This raised the Australian Government share from 41.8% to 44.7% of total primary health care expenditure (Figure 4.1 and Table A25).

Individuals' out-of-pocket funding, which is a sub-component of total non-government funding, was the other main driver of the increase in primary health care expenditure over the past 5 years. Individual out-of-pocket funding increased from \$12.9 billion in 2006–07 to \$17.2 billion in 2011–12 (Table A25).

The share of funding provided by state and territory governments and other non-government sources fell over this period (Table A25).

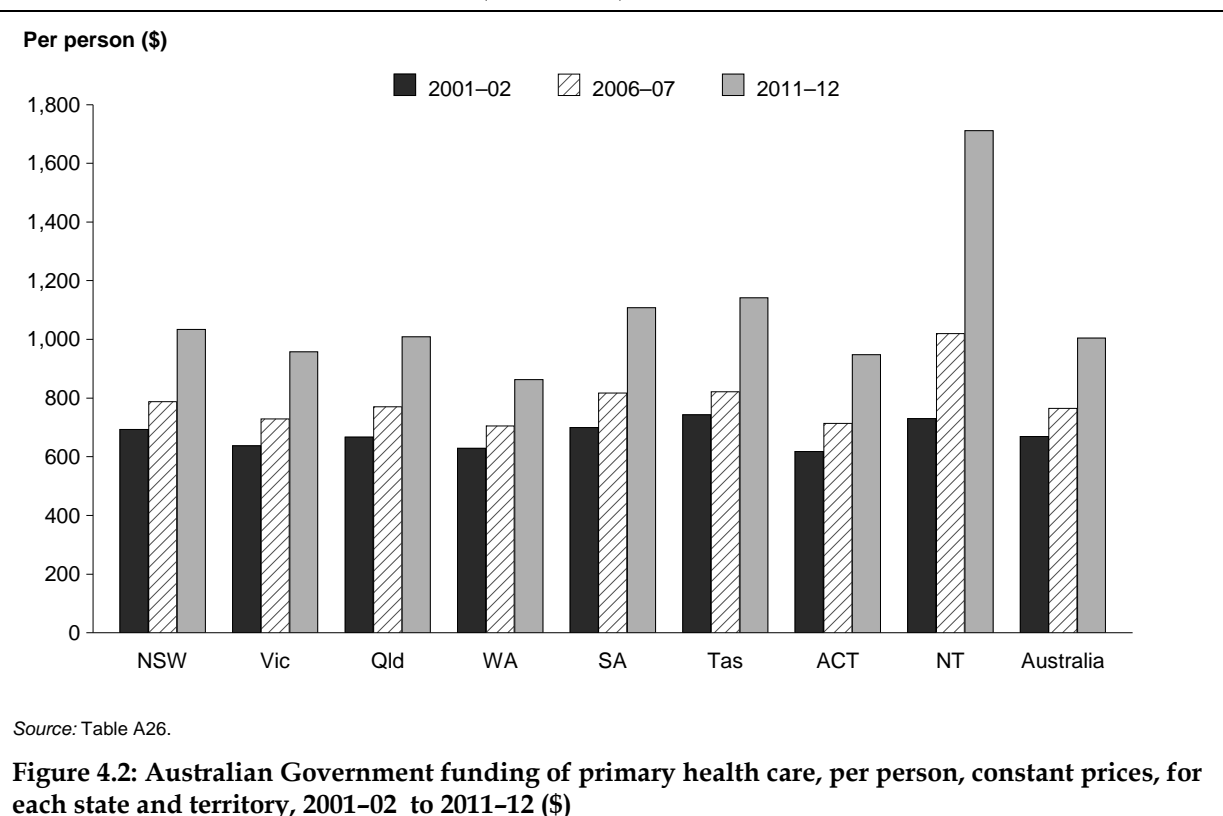


4.1 Australian Government funding

Australian Government funding of primary health care in 2011–12 was \$1,005 per person, up from \$669 in 2001–02.

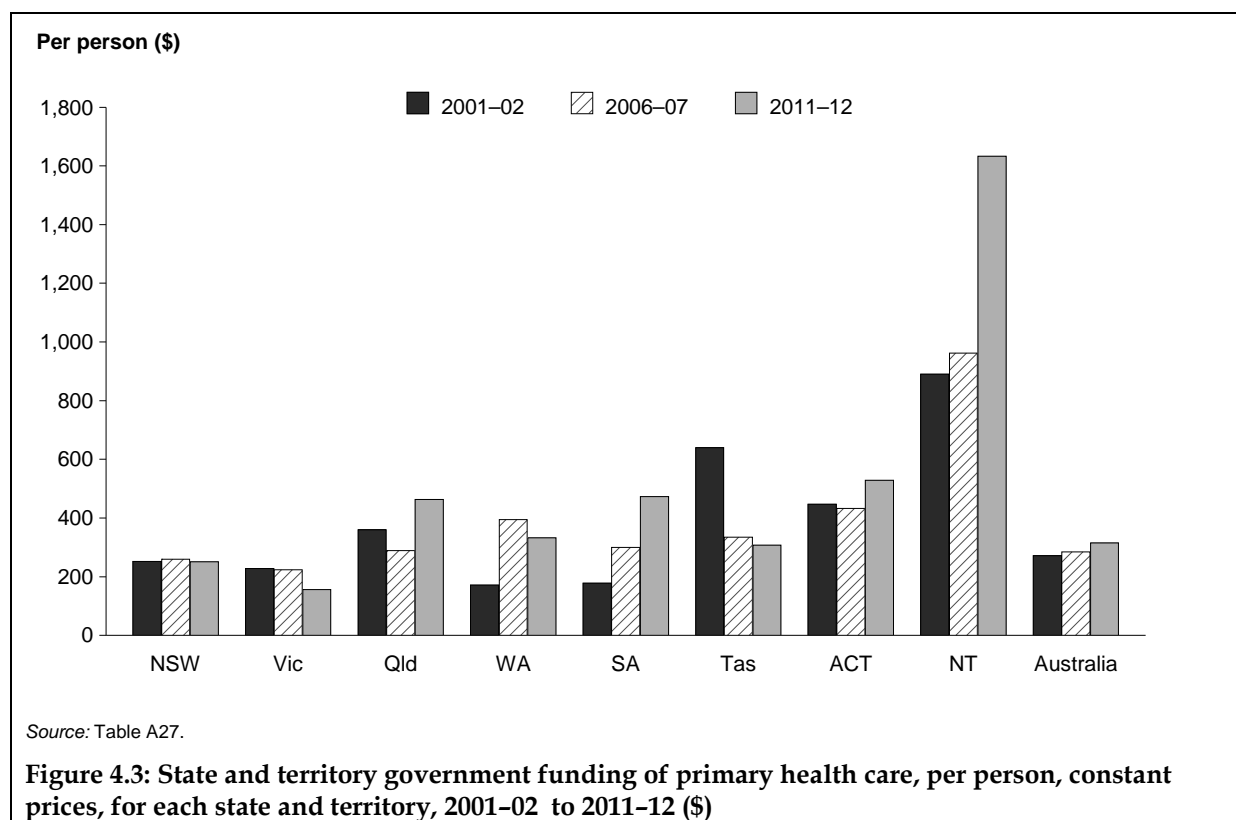
In 2011–12, per person funding from the Australian Government was the lowest in Western Australia, at \$863 per person and the highest in the Northern Territory at \$1,711 per person. In 2001–02, funding was the highest in Tasmania at \$743 per person and the lowest in the Australian Capital Territory, \$618 per person (Table A26 and Figure 4.2).

Growth in Australian Government funding for primary health care was 4.2% on average over the decade 2001–02 to 2011–12 (Table A26).



4.2 State and territory government funding

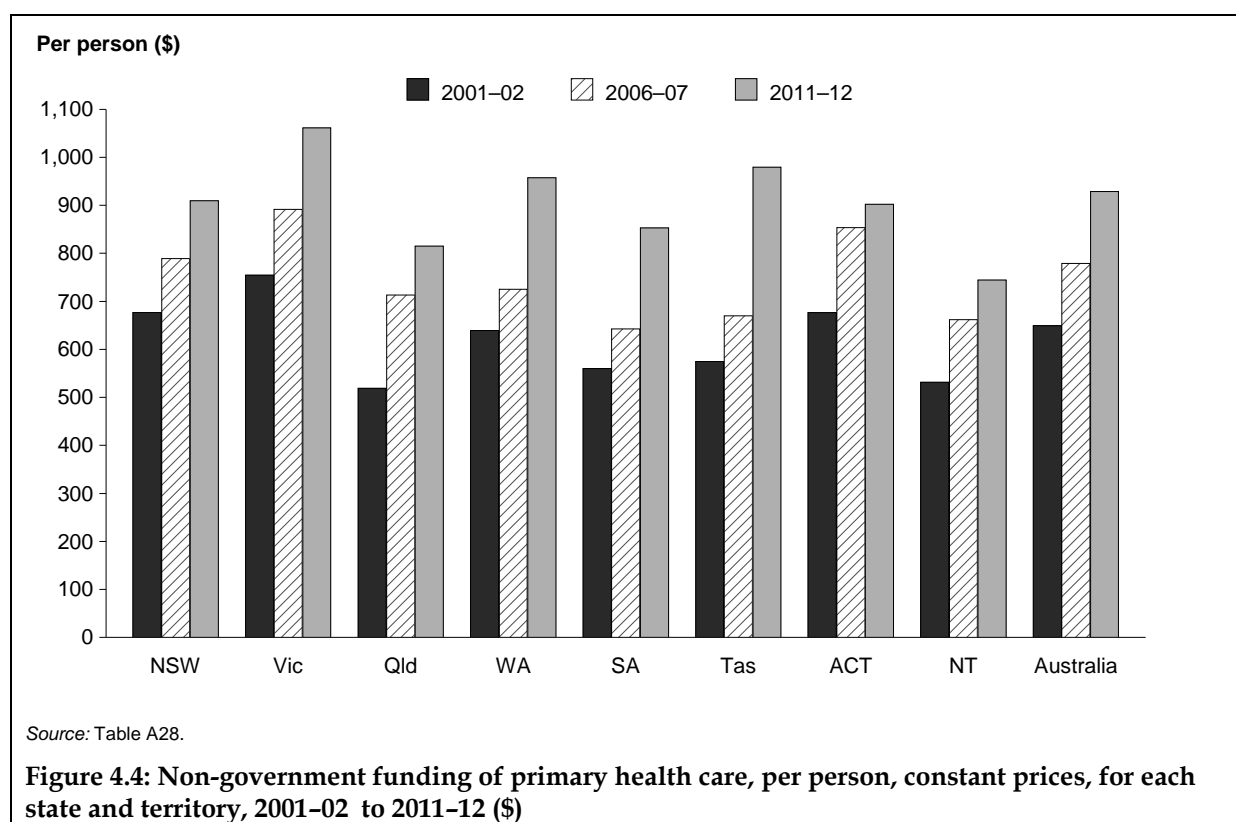
In 2011–12, on average across Australia, state and territory government funding for primary health care equated to \$315 per person. The average annual real growth in funding of primary health care services from state and territory governments increased 1.5% over the decade. The Northern Territory government funded \$1,633 per person for primary health care services. These services were mostly for community and public health services. The Victorian government provided \$869 million in funding for primary health care services in 2011–12, which equated to \$156 per person (Table A27 and Figure 4.3).



4.3 Non-government funding

In 2011-12, non-government funding for primary health care (mostly coming from individuals' out-of-pocket payments) was \$929 per person, which is an increase from \$649 per person in 2001-02 (Table A28 and Figure 4.4).

In 2011-12, non-government funding per person in Victoria was \$1,061, the highest of all of the jurisdictions. The lowest level of non-government funding was in the Northern Territory and Queensland at \$744 and \$815, respectively. For each year across the decade 2001-02 to 2011-12, Victoria had the highest non-government funding for primary health care. The average annual growth for all jurisdictions over the decade was 3.7% (Table A28 and Figure 4.4).



4.4 Primary health care by area of expenditure and source of funds

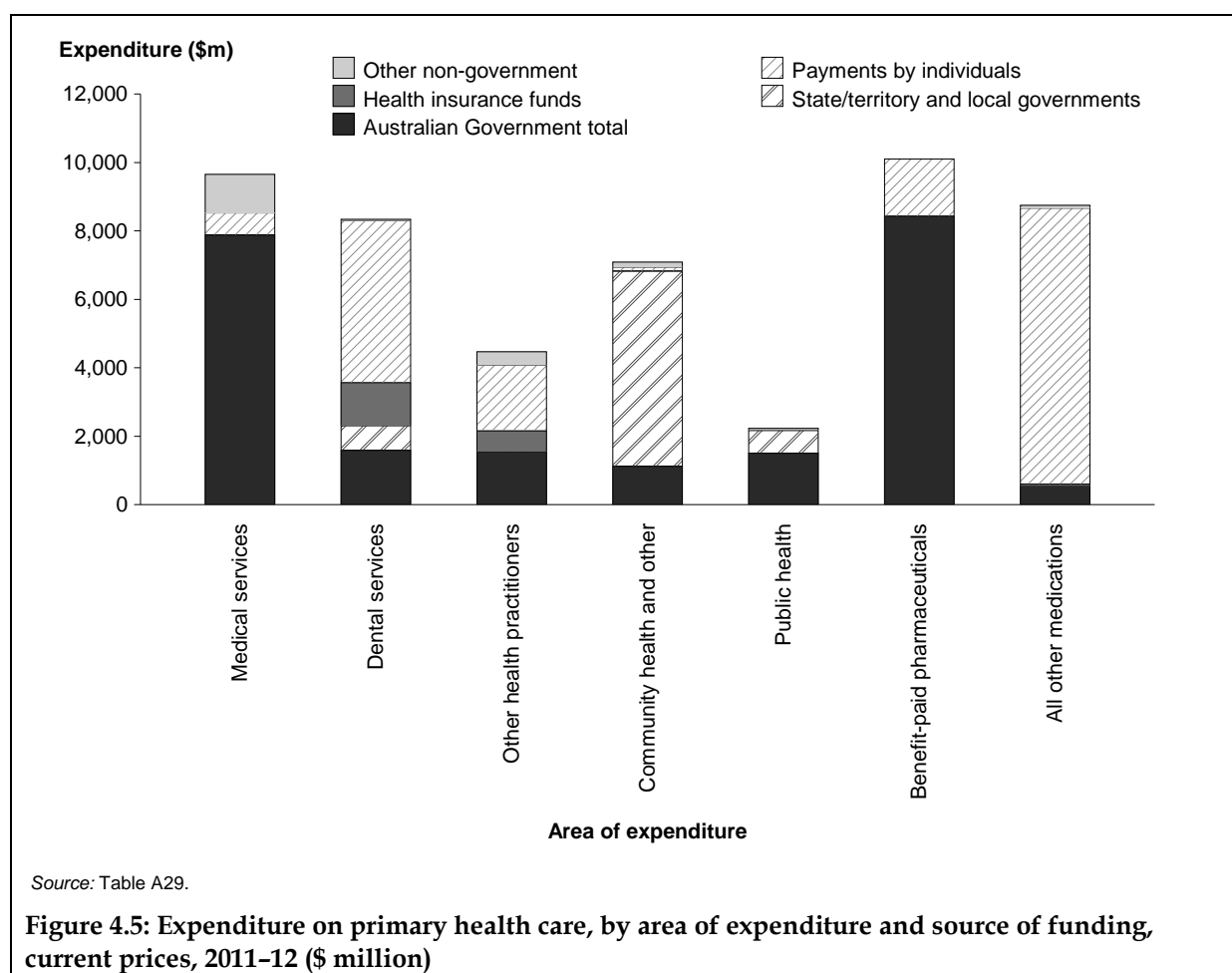
Of the \$50.6 billion spent on primary health care in 2011-12, \$10.1 billion was the cost of benefit-paid pharmaceuticals, for which the Australian Government provided the majority of the funding (\$8.4 billion). Individuals contributed \$1.7 billion out of pocket towards the cost of benefit-paid pharmaceuticals. The cost of 'all other medications' (see Glossary), which includes over-the-counter pharmaceuticals, private prescriptions as well as under co-payments pharmaceuticals was \$8.7 billion in 2011-12. Almost all of this \$8.1 billion, was paid for by individuals through out-of-pocket expenses (Table A29 and Figure 4.5).

The cost of medical services provided in the primary health care setting was \$9.7 billion in 2011-12 for which the majority of the funding came from the Australian Government (\$7.9 billion).

The cost for dental services and 'other health practitioner services' in 2011-12 was \$8.3 billion and \$4.5 billion, respectively. Individuals' out-of-pocket payments accounted for 56.8% (\$4.7 billion) and 43.1% (\$1.9 billion) of the funding for dental services and 'other health practitioner services', respectively.

Community health services cost \$7.1 billion in 2011-12, which was mostly funded through state and territory governments (\$5.7 billion).

The cost of providing public health services was \$2.2 billion, which was mostly funded by the Australian Government (\$1.5 billion) and the state and territory governments (\$0.7 billion).

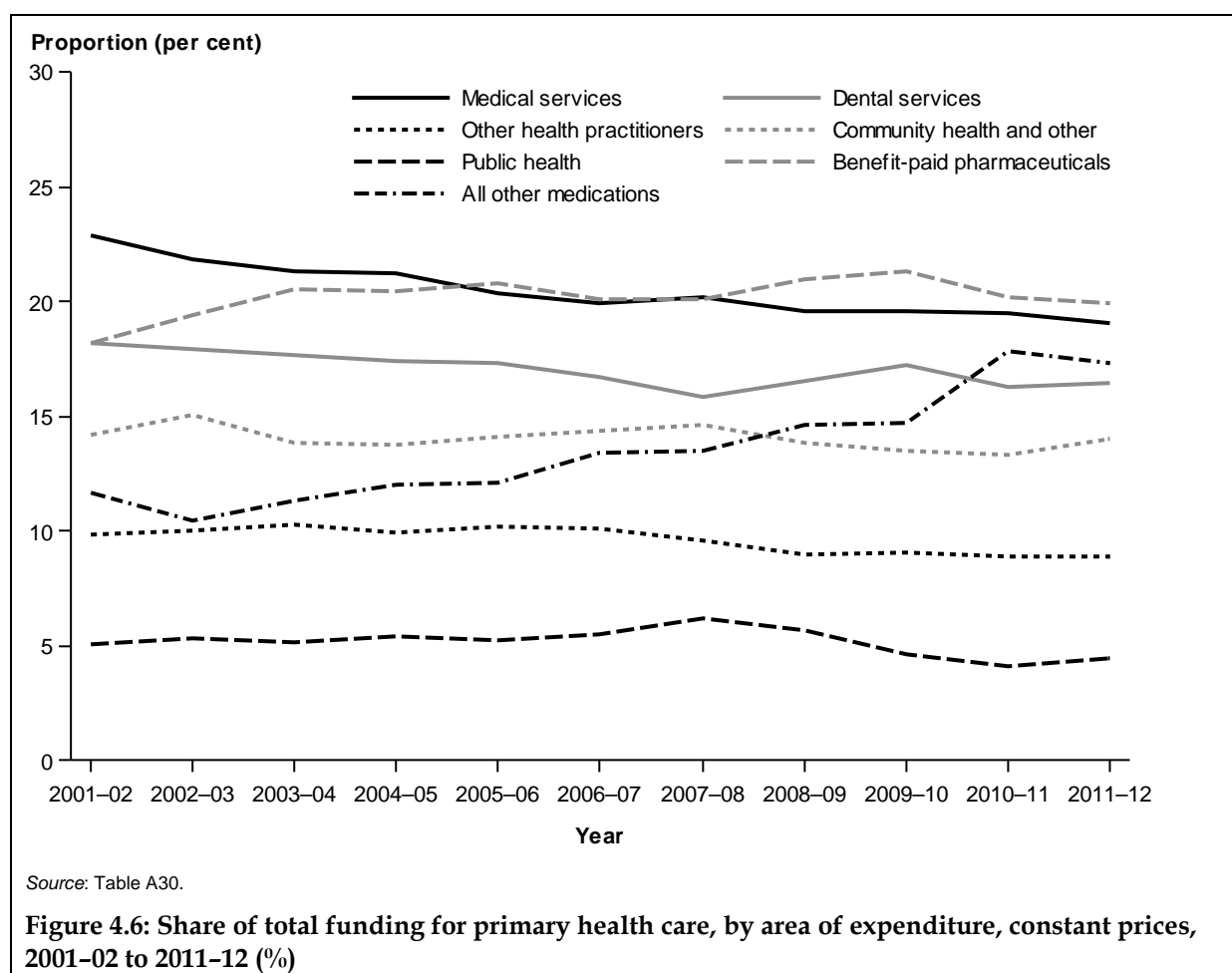


In 2001-02, medical services attracted the highest share of primary health care funding at 22.9%. This share declined over the decade to 19.1% in 2011-12 (Figure 4.6 and Table A30).

The share of funding for 'all other medications' in 2001-02 was 11.6%. Over the decade, the share increased to 17.3% in 2011-12 (Figure 4.6 and Table A30). 'All other medications' includes pharmaceuticals for which no Pharmaceutical Benefits Scheme (PBS) or Repatriation Pharmaceutical Benefits Scheme (RPBS) benefit was paid such as private prescriptions, under copayment prescriptions and over-the-counter medicines.

Public health and other health practitioner services attracted the smallest share of primary health care funding, at around 5% and 10%, respectively, across the decade (Figure 4.6 and Table A30).

The share of primary health care funding for dental services was 18.1% in 2001-02. This share gradually declined to 15.9% in 2007-08 before rising to 17.2% in 2009-10. In 2011-12, the share was 16.5% (Figure 4.6 and Table A30).



5 Other areas of health expenditure

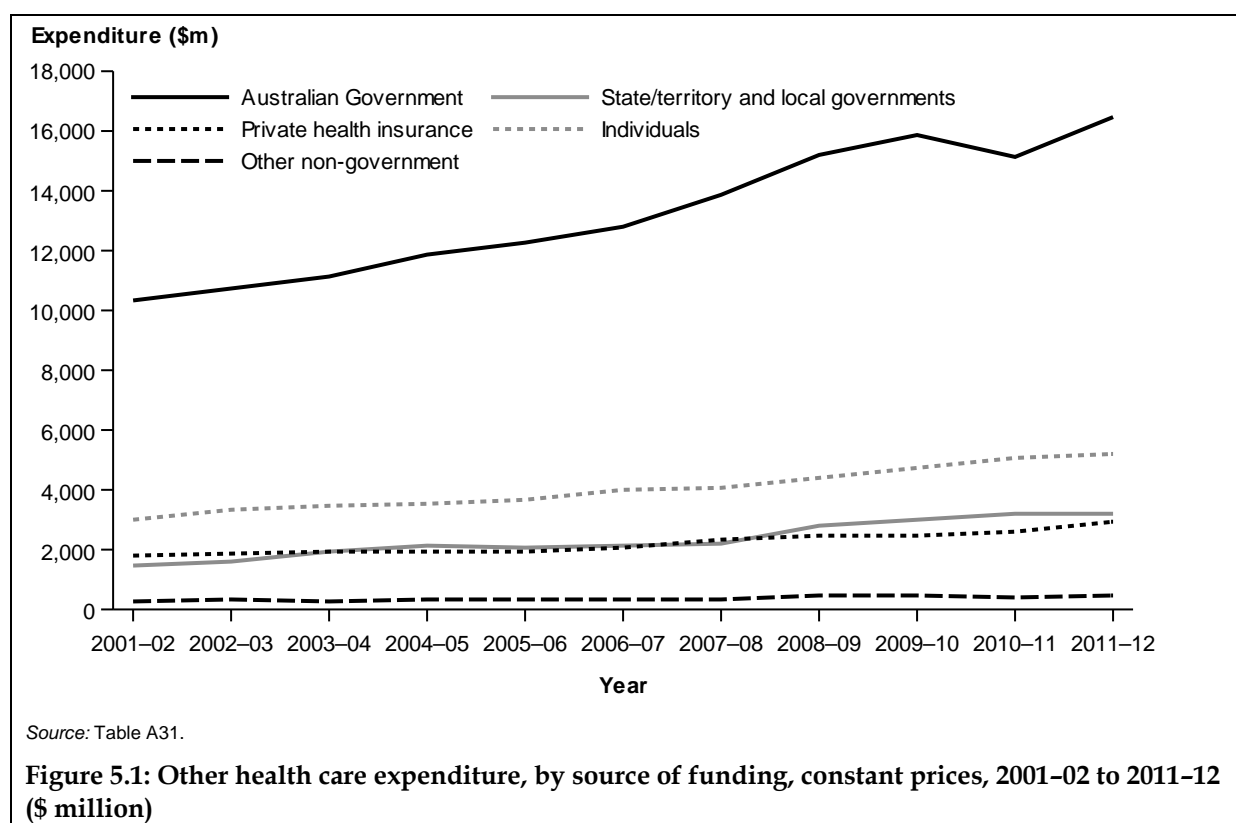
There are a number of areas of expenditure for which there is recurrent health spending that are not categorised as either hospitals or primary health care. In this report, these areas of expenditure are grouped under 'other'. The areas of expenditure that fall into this category are:

- patient transport services
- referred medical services (those non-hospital medical services that have not been classified as primary health care)
- aids and appliances
- administration
- research.

5.1 Funding for other health care

The Australian Government is the largest funding source of recurrent expenditure in 'other' areas of health care, mainly due to funding through the Medicare program. In 2011–12, the Australian Government spent \$16.5 billion, or nearly 60% of the total recurrent expenditure, in 'other' areas of health care. Individuals provided the next largest source of funds, with expenditure of \$5.2 billion in 2011–12 (Table A31 and Figure 5.1).

Average annual growth in all sources of funding have been steadily increasing at around 5.0%, with the exception of the state and territory government funding growth rate, which was 8.2% from 2001–02 to 2011–12 (Table A31).

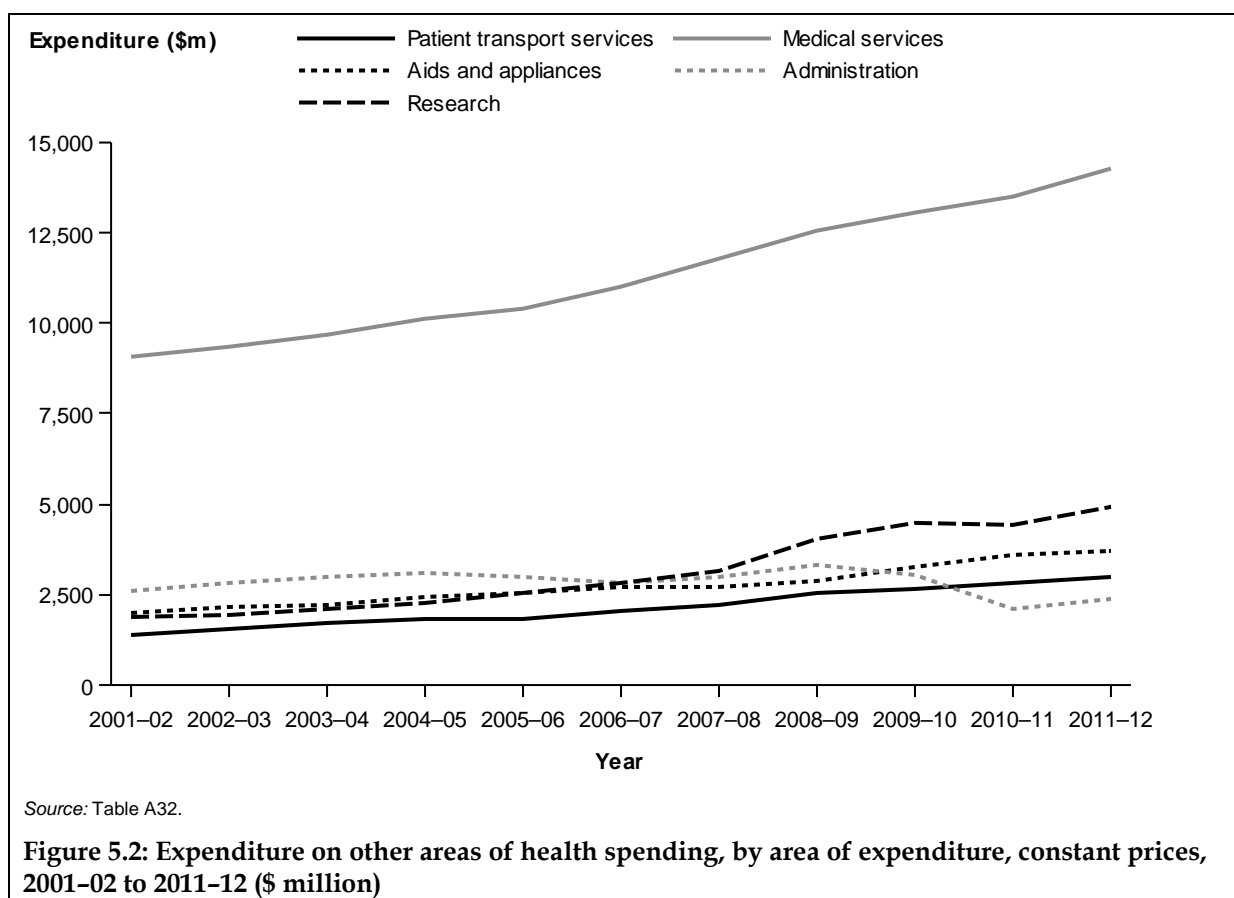


5.2 Components of other health care

Over 50% of 'other' health care expenditure is through referred medical services, with an expenditure of \$14.2 billion in 2011–12. Research, with an expenditure of \$5.0 billion in 2011–12, was the second highest area of expenditure. Expenditure on research as a proportion of total spending on other health care expenditure increased from 11.0% in 2001–02 to 17.5% in 2011–12. (Table A32 and Figure 5.2).

Since 2008–09, expenditure on administration has been decreasing from \$3.3 billion in 2008–09 to \$2.4 billion in 2011–12.

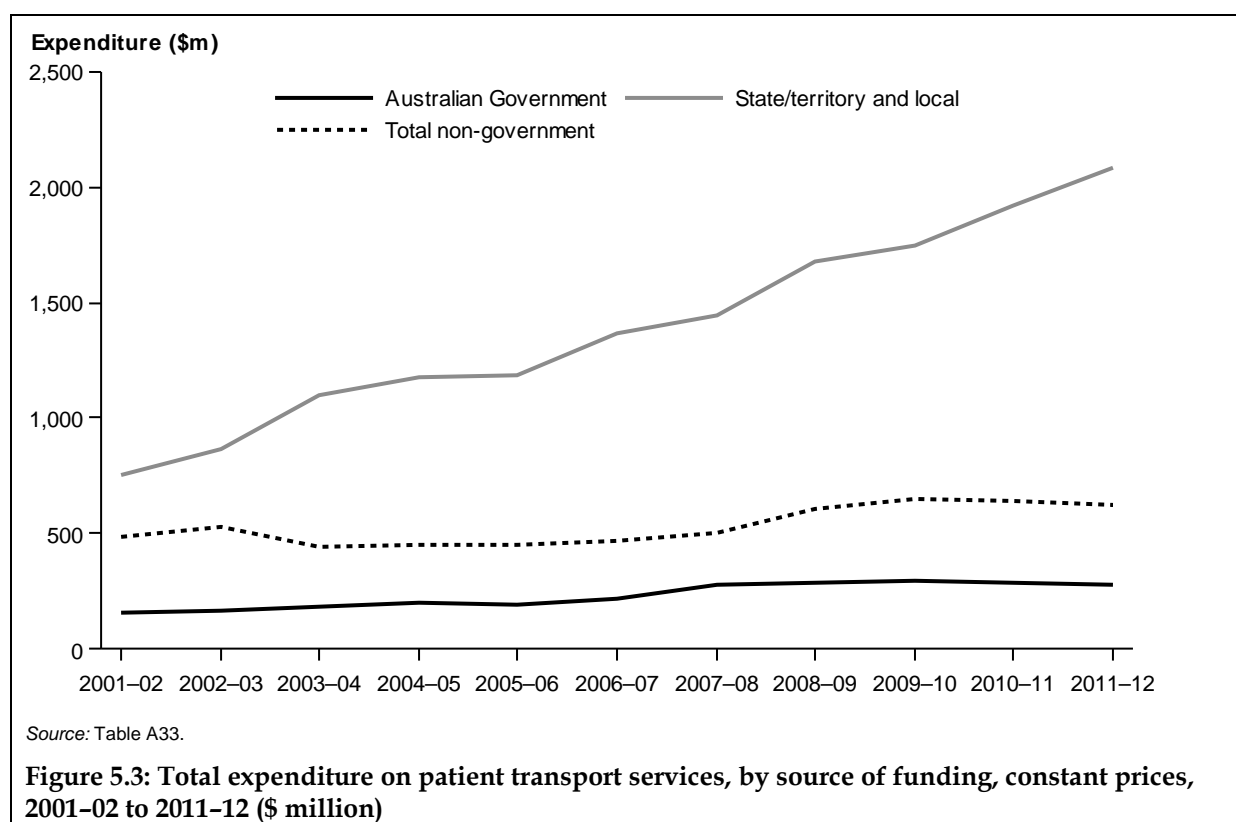
The proportions for expenditure on the 'patient transport' and 'aids and appliances' have increased from 2001–02 to 2011–12 (from 8.3% to 10.6% and from 11.9% to 13.0%, respectively) (Table A32).



Patient transport services

Of the total health expenditure on patient transport services of \$3.0 billion in 2011–12, state and territory governments funded \$2.1 billion (Table A33 and Figure 5.3).

The average annual growth for patient transport expenditure from 2001–02 to 2011–12 has been steady at 7.9%. The state and territory government average annual growth was 10.7% in the same period, which was higher than any other source of patient transport funding (Table A33).



Referred medical services

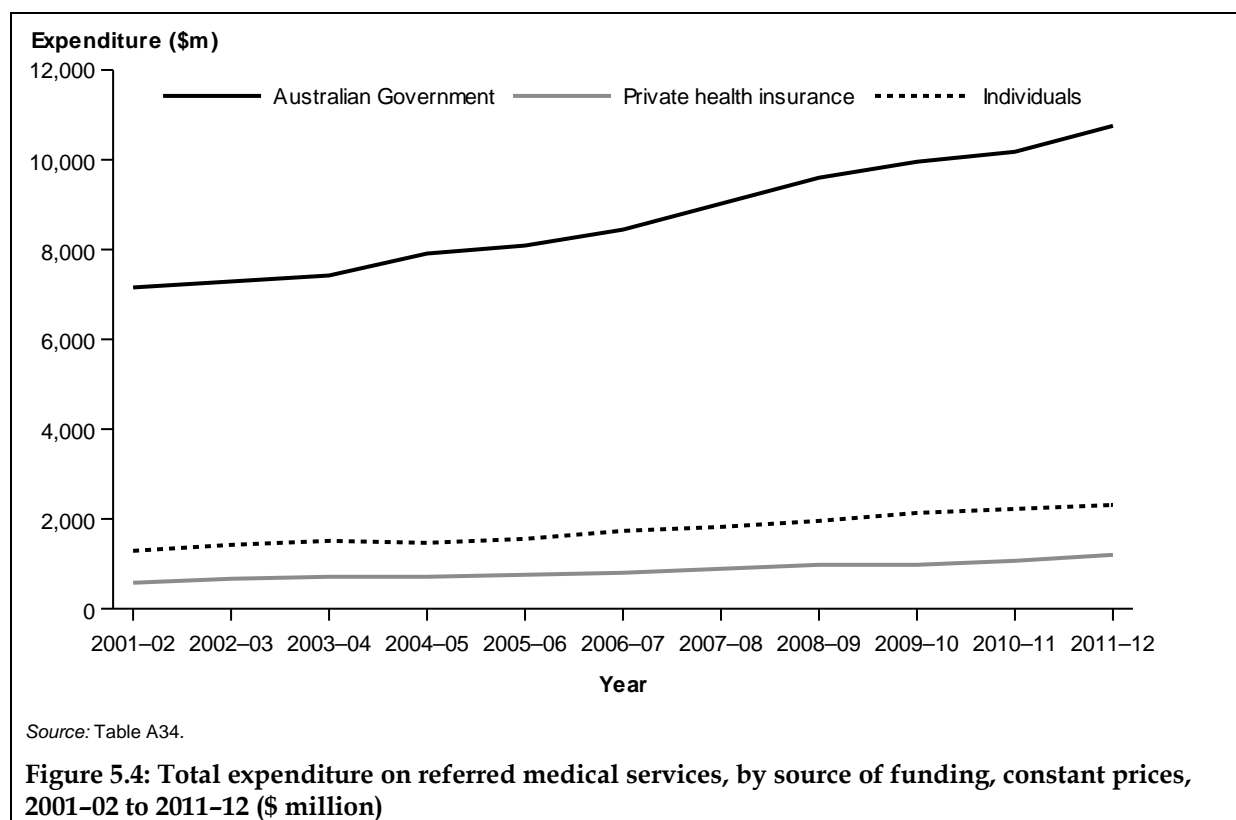
In 2011-12, \$14.2 billion was spent on medical services that are not provided through the primary health care setting such as those provided by medical specialists (Table A34 and Figure 5.4).

The majority of the \$14.2 billion was provided the Australian Government (\$10.7 billion), with the remainder of the cost funded by individuals through out-of-pocket payments (\$2.3 billion) and through private health insurance (\$1.2 billion) (Table A34 and Figure 5.4).

The growth in funding from all sources was 5.7% in 2011-12, which was higher than the growth in the 2 previous years 2010-11 (3.1%) and 2009-10 (4.0%).

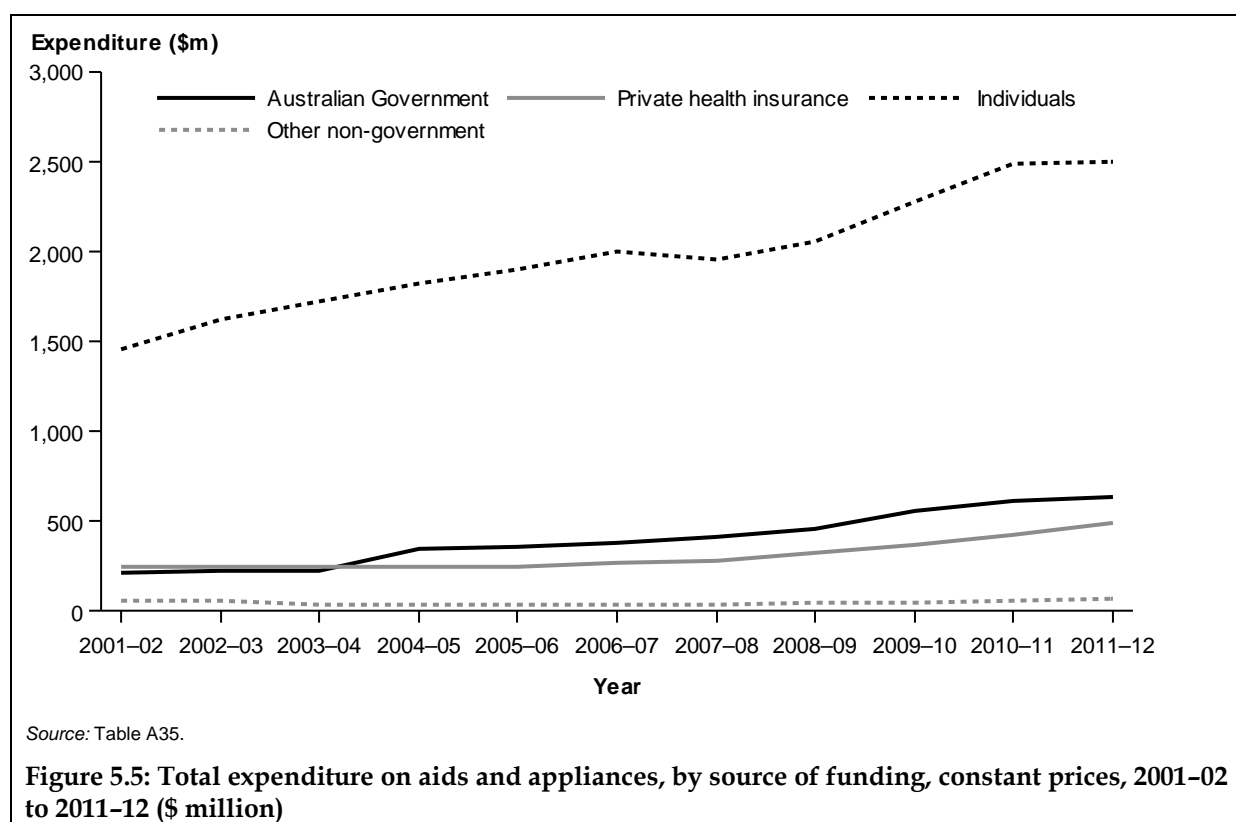
The highest growth in expenditure for referred medical services was in 2007-08 (7.1%), which was almost entirely due to the large increase in funding by the Australian Government in that year.

Between 2004-05 and 2008-09, the Australian Government had 3 years with growth over 6% for referred medical services, which coincides with the introduction of the Medicare Safety Net in 2004. After a review of the Medicare Safety Net in 2009, limits on access were introduced (van Gool et al. 2011). This coincides with the lower growth rates in 2009-10 and 2010-11 of 3.6% and 2.2%, respectively (Table A34).



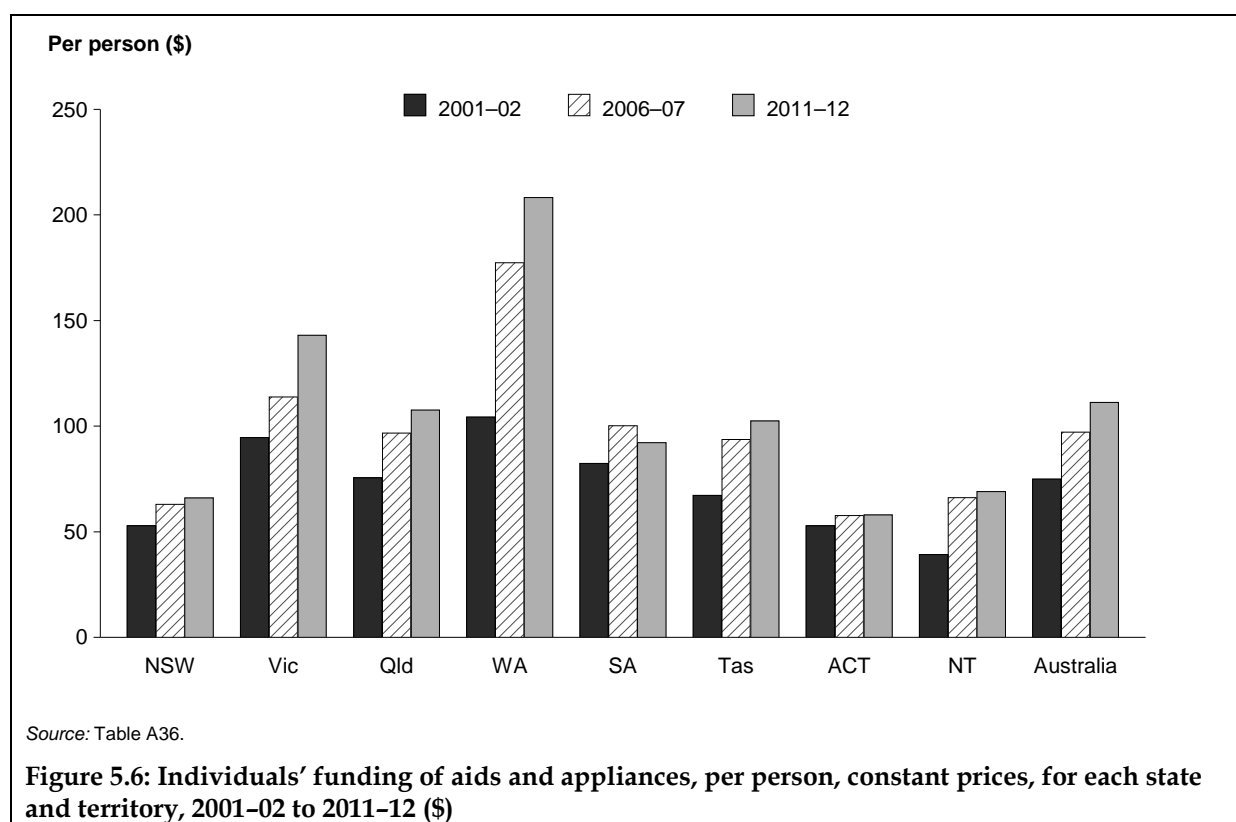
Aids and appliances

Individuals, through out-of-pocket payments, provide most of the funding for aids and appliances, at nearly 68% of the total expenditure of \$3.7 billion in 2011-12. The Australian Government provided \$0.6 billion of the total funding for aids and appliances in 2011-12. The Australian Government average annual growth rate from 2001-02 to 2011-12 was 11.6% compared with 5.6% over the same period for out-of-pocket payments by individuals (Table A35 and Figure 5.5).



From 2001-02 to 2011-12, individuals' funding for aids and appliances had the highest increase in Western Australia, with an average annual real growth rate of 7.2% over that period. The Australian Capital Territory, South Australia and New South Wales remained relatively steady, with a small average growth over that period (Table A36).

In 2011-12, Western Australia had the highest per person funding from individuals for aids and appliances, which was nearly double the national average at \$208 per person. The Australian Capital Territory had the lowest at \$58 per person (Table A36 and Figure 5.6).

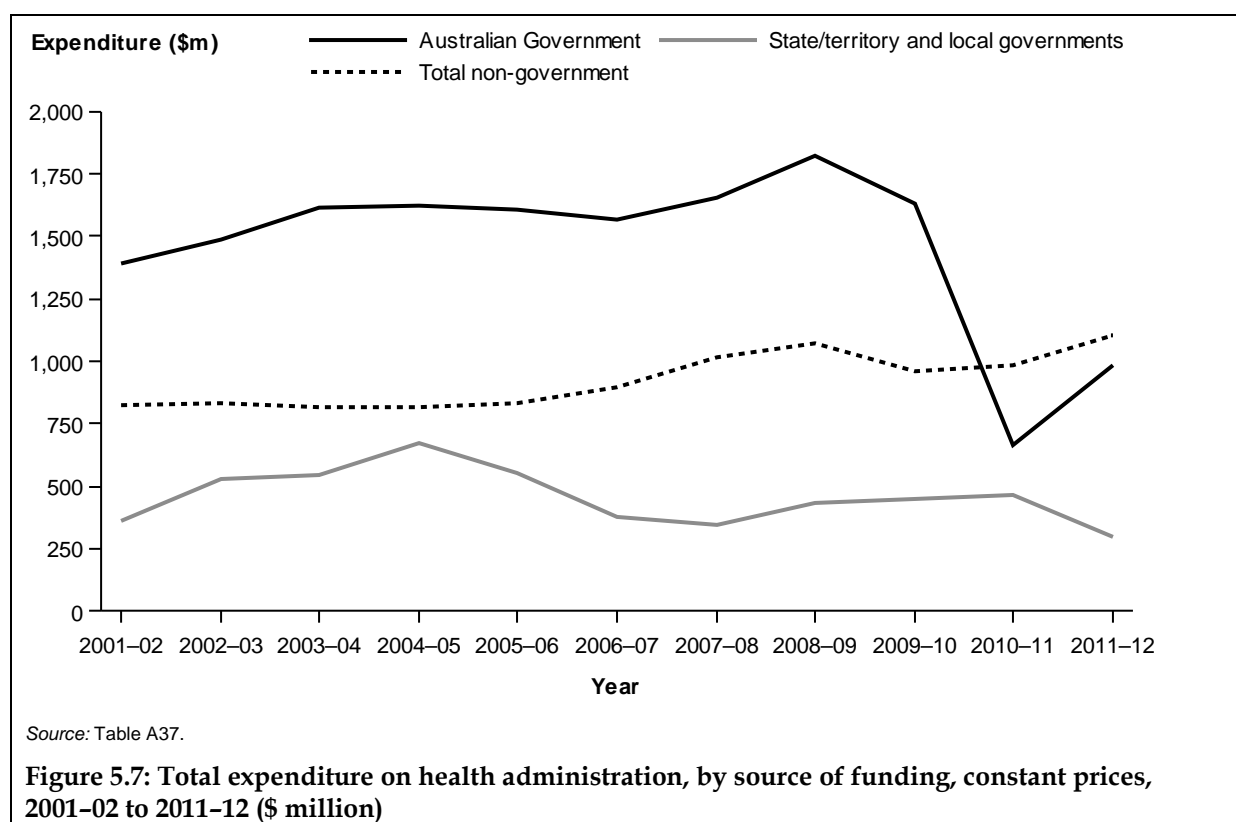


Administration

Where possible, administrative costs related to the delivery of particular health goods and services are added to the direct expenditure on those goods and services: that is, administrative costs for delivering a dental service are reported as part of dental services rather than administration. Hence, administration only includes those costs that cannot be allocated to a specific health good and service. In recent years, as more detailed data have become available, a larger share of government health administration costs have been able to be allocated to a specific health good or service, which has reduced the amount of expenditure reported as health administration.

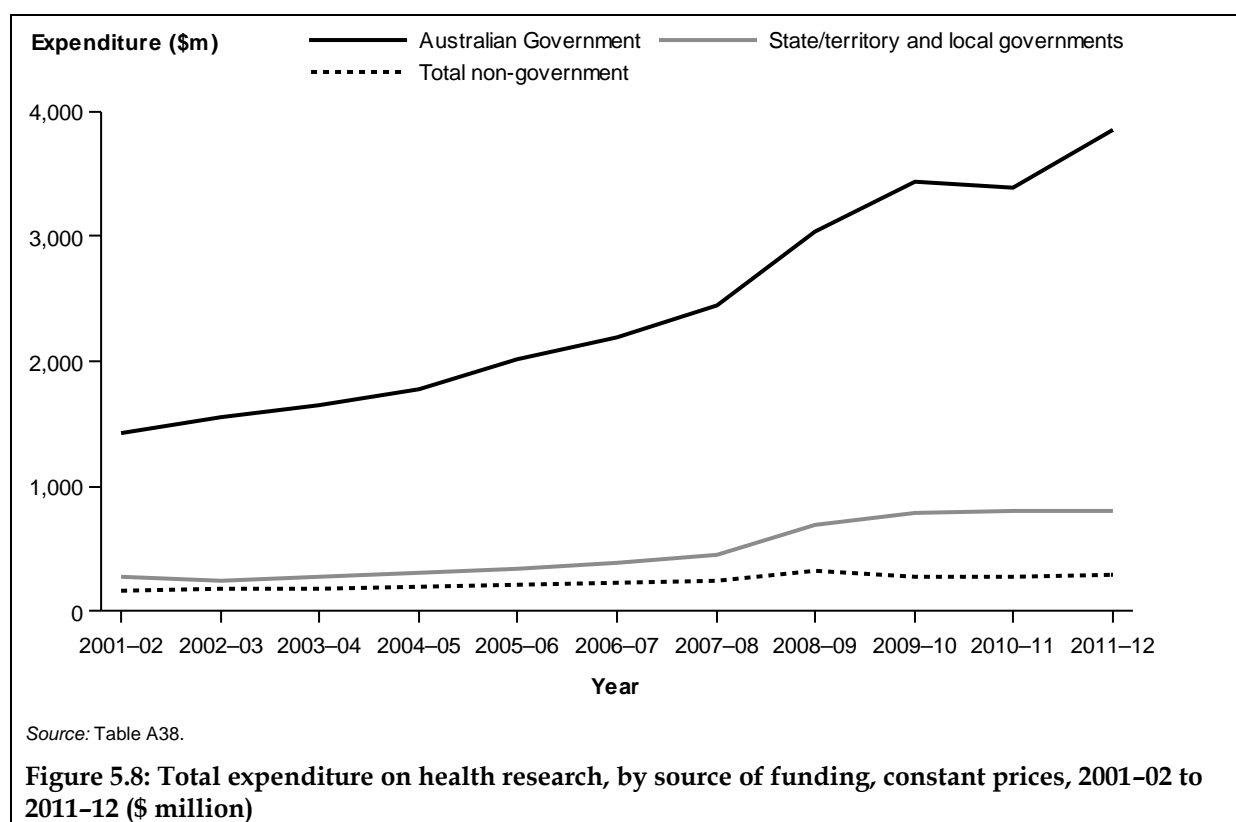
Australian Government expenditure in health administration decreased from \$1.8 billion in 2008-09 to a low of \$0.7 billion in 2010-11. In 2011-12, it increased to \$1.0 billion (Table A37 and Figure 5.7).

State and territory government expenditure in health administration has had a trend of decreasing expenditure since 2004-05. In 2011-12, the state and territory government health administration expenditure was \$0.3 billion, which was the lowest in the 10-year period (Table A37 and Figure 5.7).



Research

Research expenditure grew faster in the second half of the decade. The 5-year average annual growth rate for health research expenditure from 2006-07 to 2011-12 of 12.0% was higher than the 5-year growth rate from 2001-02 to 2006-07 of 8.5%. The growth was driven by expenditure in research from both the Australian Government and the state and territory governments. State and territory government health research expenditure growth has slowed since 2009-10, with expenditure increasing from \$783 million in 2009-10 to \$798 million in 2011-12 (Table A38 and Figure 5.8).



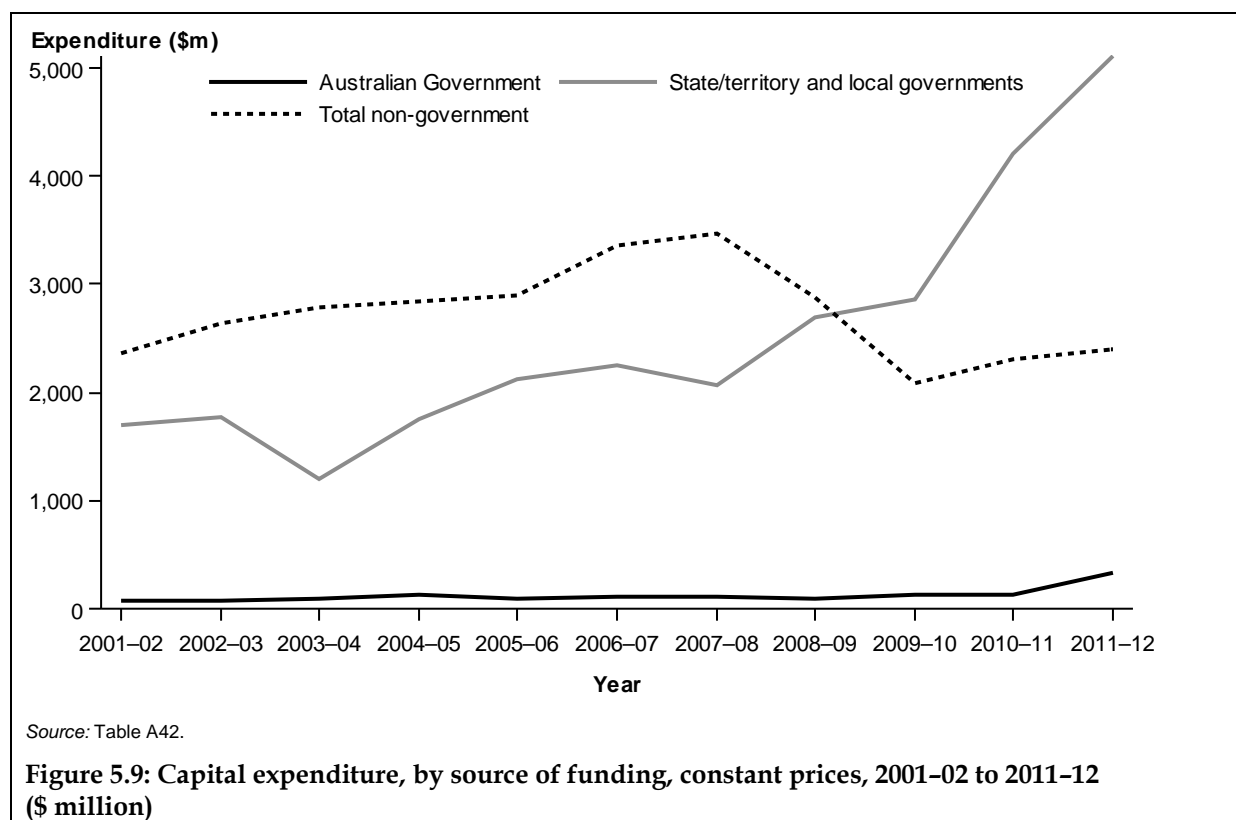
5.3 Capital expenditure

Capital expenditure on health facilities and investments in 2011-12 was \$7.9 billion, or 5.6% of total health expenditure (Tables A1 and A42).

The Australian Government's capital funding was mostly by way of grants and subsidies to other levels of government or to non-government organisations. In 2001-02, the Australian Government contributed \$84 million. This has increased to \$336 million in 2011-12 (Table A42 and Figure 5.9).

In 2011-12, the state and territory governments contributed \$5.1 billion, which was up from \$1.7 billion in 2001-02.

Capital expenditure by the non-government sector increased steadily from \$2.4 billion in 2001-02 to \$3.5 billion in 2007-08. It then dropped back to \$2.4 billion in 2011-12.



Appendix A Source tables

Table A1: Total expenditure on health, by broad area of expenditure and share of recurrent health expenditure, constant prices^(a), 2001–02 to 2011–12

| Year | Hospitals ^(b) | | Primary health care ^(c) | | Other ^(d) | | Total recurrent | | Capital expenditure | Total expenditure |
|---------|--------------------------|-----------|------------------------------------|-----------|----------------------|-----------|-----------------|-----------|---------------------|-------------------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Amount (\$m) |
| 2001–02 | 31,011 | 39.4 | 30,821 | 39.1 | 16,903 | 21.5 | 78,735 | 100.0 | 4,151 | 82,886 |
| 2002–03 | 33,231 | 39.9 | 32,084 | 38.6 | 17,889 | 21.5 | 83,203 | 100.0 | 4,501 | 87,705 |
| 2003–04 | 34,674 | 40.1 | 33,157 | 38.3 | 18,694 | 21.6 | 86,526 | 100.0 | 4,085 | 90,611 |
| 2004–05 | 36,769 | 40.1 | 35,245 | 38.4 | 19,778 | 21.5 | 91,792 | 100.0 | 4,711 | 96,503 |
| 2005–06 | 38,115 | 40.6 | 35,509 | 37.8 | 20,330 | 21.6 | 93,954 | 100.0 | 5,125 | 99,079 |
| 2006–07 | 40,162 | 40.5 | 37,727 | 38.0 | 21,363 | 21.5 | 99,251 | 100.0 | 5,723 | 104,974 |
| 2007–08 | 42,759 | 40.2 | 40,835 | 38.4 | 22,843 | 21.5 | 106,437 | 100.0 | 5,663 | 112,099 |
| 2008–09 | 45,933 | 40.3 | 42,766 | 37.5 | 25,404 | 22.3 | 114,102 | 100.0 | 5,656 | 119,758 |
| 2009–10 | 48,036 | 40.1 | 45,129 | 37.7 | 26,536 | 22.2 | 119,701 | 100.0 | 5,081 | 124,782 |
| 2010–11 | 50,931 | 40.4 | 48,537 | 38.5 | 26,468 | 21.0 | 125,937 | 100.0 | 6,641 | 132,578 |
| 2011–12 | 53,509 | 40.4 | 50,621 | 38.2 | 28,256 | 21.3 | 132,386 | 100.0 | 7,855 | 140,241 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(b) Includes public hospital services and private hospitals.

(c) Includes medications, non-referred medical services, dental services, other health practitioner services, community health and public health.

(d) Includes research, aids and appliances, patient transport services, referred medical services and administration.

Source: AIHW health expenditure database.

Table A2: Australian Government funding of health, by broad area of expenditure and share of Australian Government recurrent health expenditure, constant prices^(a), 2001–02 to 2011–12 (\$ million)

| Year | Hospitals ^(b) | | Primary health care ^(c) | | Other ^(d) | | Total recurrent | | Capital expenditure | Total expenditure |
|---------|--------------------------|-----------|------------------------------------|-----------|----------------------|-----------|-----------------|-----------|---------------------|-------------------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Amount (\$m) |
| 2001–02 | 13,292 | 36.3 | 12,968 | 35.4 | 10,341 | 28.3 | 36,600 | 100.0 | 84 | 36,684 |
| 2002–03 | 14,067 | 36.8 | 13,461 | 35.2 | 10,704 | 28.0 | 38,232 | 100.0 | 77 | 38,309 |
| 2003–04 | 14,231 | 36.2 | 13,951 | 35.5 | 11,104 | 28.3 | 39,286 | 100.0 | 96 | 39,381 |
| 2004–05 | 14,893 | 35.6 | 15,055 | 36.0 | 11,868 | 28.4 | 41,817 | 100.0 | 128 | 41,944 |
| 2005–06 | 14,829 | 35.4 | 14,832 | 35.4 | 12,283 | 29.3 | 41,944 | 100.0 | 103 | 42,046 |
| 2006–07 | 15,150 | 34.7 | 15,787 | 36.1 | 12,785 | 29.2 | 43,722 | 100.0 | 112 | 43,834 |
| 2007–08 | 16,504 | 34.2 | 17,921 | 37.1 | 13,839 | 28.7 | 48,263 | 100.0 | 111 | 48,374 |
| 2008–09 | 18,264 | 34.8 | 18,957 | 36.1 | 15,222 | 29.0 | 52,442 | 100.0 | 96 | 52,539 |
| 2009–10 | 17,844 | 33.1 | 20,261 | 37.5 | 15,880 | 29.4 | 53,985 | 100.0 | 135 | 54,120 |
| 2010–11 | 19,370 | 34.6 | 21,526 | 38.4 | 15,132 | 27.0 | 56,028 | 100.0 | 135 | 56,163 |
| 2011–12 | 19,536 | 33.3 | 22,622 | 38.6 | 16,488 | 28.1 | 58,647 | 100.0 | 336 | 58,983 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(b) Includes public hospital services and private hospitals.

(c) Includes medications, non-referred medical services, dental services, other health practitioner services, community health and public health.

(d) Includes research, aids and appliances, patient transport services, referred medical services and administration.

Source: AIHW health expenditure database.

Table A3: Ratio of Australian Government funding of health expenditure to tax revenue, current prices, 2001–02 to 2011–12 (%)

| Year | Australian Government funding of health expenditure (\$ million) | Australian Government tax revenue^(a) (\$ million) | Ratio (%) |
|-------------|---|---|------------------|
| 2001–02 | 27,549 | 123,738 | 22.3 |
| 2002–03 | 29,780 | 139,000 | 21.4 |
| 2003–04 | 31,782 | 150,620 | 21.1 |
| 2004–05 | 35,201 | 166,427 | 21.2 |
| 2005–06 | 36,743 | 178,192 | 20.6 |
| 2006–07 | 39,496 | 192,583 | 20.5 |
| 2007–08 | 44,391 | 209,038 | 21.2 |
| 2008–09 | 49,588 | 198,539 | 25.0 |
| 2009–10 | 52,437 | 183,055 | 28.6 |
| 2010–11 | 55,143 | 200,881 | 27.5 |
| 2011–12 | 58,983 | 225,173 | 26.2 |

(a) Taxation revenue is adjusted to take into account the level of government at which revenue is used rather than collected.

Sources: AIHW health expenditure database; ABS 2013a.

Table A4: State and territory government funding of health, by broad area of expenditure and share of state and territory government recurrent health expenditure, constant prices^(a), 2001–02 to 2011–12

| Year | Hospitals ^(b) | | Primary health care ^(c) | | Other ^(d) | | Total recurrent | | Capital expenditure | Total expenditure |
|---------|--------------------------|-----------|------------------------------------|-----------|----------------------|-----------|-----------------|-----------|---------------------|-------------------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Amount (\$m) |
| 2001–02 | 11,407 | 63.0 | 5,264 | 29.1 | 1,445 | 8.0 | 18,116 | 100.0 | 1,697 | 19,812 |
| 2002–03 | 13,008 | 64.1 | 5,647 | 27.8 | 1,640 | 8.1 | 20,294 | 100.0 | 1,781 | 22,075 |
| 2003–04 | 14,110 | 67.1 | 5,003 | 23.8 | 1,922 | 9.1 | 21,035 | 100.0 | 1,203 | 22,238 |
| 2004–05 | 15,076 | 67.3 | 5,170 | 23.1 | 2,158 | 9.6 | 22,405 | 100.0 | 1,750 | 24,155 |
| 2005–06 | 16,344 | 68.5 | 5,427 | 22.8 | 2,074 | 8.7 | 23,846 | 100.0 | 2,120 | 25,966 |
| 2006–07 | 17,689 | 68.9 | 5,874 | 22.9 | 2,129 | 8.3 | 25,692 | 100.0 | 2,245 | 27,937 |
| 2007–08 | 18,604 | 68.5 | 6,342 | 23.3 | 2,226 | 8.2 | 27,172 | 100.0 | 2,075 | 29,247 |
| 2008–09 | 18,389 | 66.1 | 6,622 | 23.8 | 2,798 | 10.1 | 27,809 | 100.0 | 2,688 | 30,498 |
| 2009–10 | 20,658 | 68.4 | 6,548 | 21.7 | 2,981 | 9.9 | 30,188 | 100.0 | 2,853 | 33,041 |
| 2010–11 | 21,208 | 68.2 | 6,692 | 21.5 | 3,175 | 10.2 | 31,075 | 100.0 | 4,204 | 35,279 |
| 2011–12 | 22,905 | 69.0 | 7,092 | 21.4 | 3,182 | 9.6 | 33,179 | 100.0 | 5,111 | 38,290 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(b) Includes public hospital services and private hospitals.

(c) Includes medications, non-referred medical services, dental services, other health practitioner services, community health and public health.

(d) Includes research, aids and appliances, patient transport services, referred medical services and administration.

Source: AIHW health expenditure database.

Table A5: Ratio of state and territory government funding of health expenditure to tax revenue, current prices, 2001–02 to 2011–12 (%)

| Year | State and territory government funding of health expenditure (\$ million) | State and territory government tax revenue^(a) (\$ million) | Ratio (%) |
|-------------|--|--|------------------|
| 2001–02 | 14,661 | 89,669 | 16.4 |
| 2002–03 | 16,780 | 94,824 | 17.7 |
| 2003–04 | 17,349 | 101,963 | 17.0 |
| 2004–05 | 19,426 | 107,304 | 18.1 |
| 2005–06 | 21,907 | 114,155 | 19.2 |
| 2006–07 | 24,485 | 121,921 | 20.1 |
| 2007–08 | 26,379 | 132,512 | 19.9 |
| 2008–09 | 28,493 | 134,199 | 21.2 |
| 2009–10 | 31,870 | 141,338 | 22.5 |
| 2010–11 | 34,490 | 149,995 | 23.0 |
| 2011–12 | 38,290 | 156,494 | 24.5 |

(a) Taxation revenue is adjusted to take into account the level of government at which revenue is used rather than collected.

Sources: AIHW health expenditure database; ABS 2013a.

Table A6: Non-government^(a) funding of health, by broad area of expenditure and share of non-government recurrent health expenditure, constant prices^(b), 2001–02 to 2011–12

| Year | Hospitals ^(c) | | Primary health care ^(d) | | Other ^(e) | | Total recurrent | | Capital expenditure | Total expenditure |
|---------|--------------------------|-----------|------------------------------------|-----------|----------------------|-----------|-----------------|-----------|---------------------|-------------------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Amount (\$m) |
| 2001–02 | 6,312 | 26.3 | 12,590 | 52.4 | 5,117 | 21.3 | 24,019 | 100.0 | 2,370 | 26,389 |
| 2002–03 | 6,156 | 24.9 | 12,975 | 52.6 | 5,546 | 22.5 | 24,677 | 100.0 | 2,644 | 27,321 |
| 2003–04 | 6,334 | 24.2 | 14,203 | 54.2 | 5,668 | 21.6 | 26,205 | 100.0 | 2,786 | 28,991 |
| 2004–05 | 6,800 | 24.7 | 15,019 | 54.5 | 5,752 | 20.9 | 27,571 | 100.0 | 2,834 | 30,404 |
| 2005–06 | 6,942 | 24.6 | 15,250 | 54.1 | 5,973 | 21.2 | 28,165 | 100.0 | 2,902 | 31,067 |
| 2006–07 | 7,323 | 24.5 | 16,066 | 53.8 | 6,449 | 21.6 | 29,837 | 100.0 | 3,366 | 33,203 |
| 2007–08 | 7,651 | 24.7 | 16,572 | 53.5 | 6,778 | 21.9 | 31,001 | 100.0 | 3,477 | 34,478 |
| 2008–09 | 9,280 | 27.4 | 17,187 | 50.8 | 7,384 | 21.8 | 33,851 | 100.0 | 2,871 | 36,722 |
| 2009–10 | 9,534 | 26.8 | 18,320 | 51.6 | 7,675 | 21.6 | 35,529 | 100.0 | 2,093 | 37,622 |
| 2010–11 | 10,353 | 26.7 | 20,319 | 52.3 | 8,162 | 21.0 | 38,834 | 100.0 | 2,302 | 41,136 |
| 2011–12 | 11,068 | 27.3 | 20,906 | 51.5 | 8,585 | 21.2 | 40,560 | 100.0 | 2,408 | 42,968 |

(a) Non-government funding includes funding from private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

(b) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(c) Includes public hospital services and private hospitals.

(d) Includes medications, non-referred medical services, dental services, other health practitioner services, community health and public health.

(e) Includes research, aids and appliances, patient transport services, referred medical services and administration.

Source: AIHW health expenditure database.

Table A7: Australian Government funding of total health expenditure, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-----------|
| 2001–02 | 1,927 | 1,845 | 1,878 | 1,826 | 2,004 | 1,875 | 2,088 | 1,697 | 1,892 |
| 2002–03 | 1,988 | 1,919 | 1,923 | 1,900 | 2,072 | 1,933 | 2,089 | 1,741 | 1,954 |
| 2003–04 | 1,998 | 1,951 | 1,974 | 1,939 | 2,092 | 1,992 | 2,271 | 1,902 | 1,986 |
| 2004–05 | 2,117 | 2,045 | 2,091 | 2,033 | 2,204 | 2,050 | 2,302 | 1,994 | 2,092 |
| 2005–06 | 2,088 | 2,025 | 2,074 | 1,972 | 2,204 | 2,052 | 2,264 | 2,205 | 2,070 |
| 2006–07 | 2,145 | 2,099 | 2,112 | 2,004 | 2,247 | 2,078 | 2,405 | 2,321 | 2,125 |
| 2007–08 | 2,342 | 2,280 | 2,245 | 2,145 | 2,417 | 2,416 | 2,580 | 2,691 | 2,302 |
| 2008–09 | 2,511 | 2,453 | 2,358 | 2,202 | 2,595 | 2,553 | 2,639 | 2,822 | 2,446 |
| 2009–10 | 2,566 | 2,450 | 2,378 | 2,212 | 2,641 | 2,701 | 2,559 | 2,923 | 2,475 |
| 2010–11 | 2,589 | 2,540 | 2,485 | 2,262 | 2,677 | 2,651 | 2,667 | 2,799 | 2,533 |
| 2011–12 | 2,678 | 2,634 | 2,585 | 2,270 | 2,764 | 2,621 | 2,871 | 3,379 | 2,620 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 2.2 | 2.6 | 2.4 | 1.9 | 2.3 | 2.1 | 2.9 | 6.5 | 2.3 |
| 2006–07 to 2011–12 | 4.5 | 4.6 | 4.1 | 2.5 | 4.2 | 4.8 | 3.6 | 7.8 | 4.3 |
| 2001–02 to 2011–12 | 3.3 | 3.6 | 3.2 | 2.2 | 3.3 | 3.4 | 3.2 | 7.1 | 3.3 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A8: State and territory government funding of total health expenditure, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-----------|
| 2001–02 | 967 | 975 | 1,145 | 891 | 931 | 1,417 | 1,417 | 2,087 | 1,022 |
| 2002–03 | 1,022 | 1,189 | 1,113 | 1,147 | 1,142 | 971 | 1,667 | 2,441 | 1,126 |
| 2003–04 | 1,141 | 984 | 1,078 | 1,206 | 1,233 | 937 | 1,586 | 2,684 | 1,122 |
| 2004–05 | 1,250 | 1,024 | 1,071 | 1,361 | 1,449 | 1,033 | 1,801 | 2,770 | 1,205 |
| 2005–06 | 1,289 | 1,130 | 1,246 | 1,339 | 1,423 | 1,162 | 1,911 | 2,742 | 1,278 |
| 2006–07 | 1,301 | 1,170 | 1,442 | 1,481 | 1,486 | 1,290 | 1,930 | 2,856 | 1,354 |
| 2007–08 | 1,291 | 1,135 | 1,575 | 1,558 | 1,642 | 1,354 | 1,960 | 2,965 | 1,392 |
| 2008–09 | 1,268 | 1,136 | 1,670 | 1,594 | 1,750 | 1,299 | 2,182 | 3,176 | 1,420 |
| 2009–10 | 1,313 | 1,224 | 1,866 | 1,615 | 1,883 | 1,328 | 2,422 | 3,012 | 1,511 |
| 2010–11 | 1,347 | 1,295 | 1,869 | 1,872 | 1,920 | 1,747 | 2,627 | 3,812 | 1,591 |
| 2011–12 | 1,400 | 1,300 | 2,042 | 2,219 | 2,052 | 1,650 | 2,888 | 4,496 | 1,701 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 6.1 | 3.7 | 4.7 | 10.7 | 9.8 | –1.9 | 6.4 | 6.5 | 5.8 |
| 2006–07 to 2011–12 | 1.5 | 2.1 | 7.2 | 8.4 | 6.7 | 5.0 | 8.4 | 9.5 | 4.7 |
| 2001–02 to 2011–12 | 3.8 | 2.9 | 6.0 | 9.6 | 8.2 | 1.5 | 7.4 | 8.0 | 5.2 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A9: Non-government^(a) funding of total health expenditure, per person, constant prices^(b), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-----------|
| 2001–02 | 1,305 | 1,550 | 1,298 | 1,397 | 1,209 | 1,244 | 1,338 | 968 | 1,361 |
| 2002–03 | 1,354 | 1,606 | 1,291 | 1,389 | 1,207 | 1,340 | 1,450 | 987 | 1,394 |
| 2003–04 | 1,434 | 1,581 | 1,435 | 1,492 | 1,318 | 1,299 | 1,603 | 975 | 1,462 |
| 2004–05 | 1,475 | 1,670 | 1,420 | 1,608 | 1,400 | 1,375 | 1,698 | 1,055 | 1,517 |
| 2005–06 | 1,457 | 1,687 | 1,424 | 1,709 | 1,350 | 1,567 | 1,712 | 1,294 | 1,530 |
| 2006–07 | 1,571 | 1,743 | 1,572 | 1,729 | 1,407 | 1,420 | 1,611 | 1,150 | 1,610 |
| 2007–08 | 1,626 | 1,665 | 1,635 | 1,771 | 1,649 | 1,386 | 1,471 | 1,139 | 1,641 |
| 2008–09 | 1,694 | 1,774 | 1,685 | 1,828 | 1,674 | 1,493 | 1,438 | 1,167 | 1,710 |
| 2009–10 | 1,729 | 1,897 | 1,650 | 1,755 | 1,490 | 1,383 | 1,435 | 1,117 | 1,721 |
| 2010–11 | 1,833 | 2,067 | 1,749 | 1,922 | 1,649 | 1,638 | 1,633 | 1,207 | 1,855 |
| 2011–12 | 1,889 | 2,165 | 1,796 | 1,842 | 1,681 | 1,929 | 1,631 | 1,313 | 1,909 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 3.8 | 2.4 | 3.9 | 4.4 | 3.1 | 2.7 | 3.8 | 3.5 | 3.4 |
| 2006–07 to 2011–12 | 3.8 | 4.4 | 2.7 | 1.3 | 3.6 | 6.3 | 0.2 | 2.7 | 3.5 |
| 2001–02 to 2011–12 | 3.8 | 3.4 | 3.3 | 2.8 | 3.4 | 4.5 | 2.0 | 3.1 | 3.4 |

(a) Non-government funding includes funding from private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

(b) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A10: Total expenditure on hospitals, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Private health insurance | | Individuals | | Other non-government | | Total non-government | | Total | |
|--------------------------------|-----------------------|------------|---------------------------|------------|------------------|------------|--------------------------|------------|--------------|------------|----------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 13,292 | .. | 11,407 | .. | 24,699 | .. | 3,737 | .. | 919 | .. | 1,656 | .. | 6,312 | .. | 31,011 | .. |
| 2002–03 | 14,067 | 5.8 | 13,008 | 14.0 | 27,075 | 9.6 | 3,937 | 5.3 | 605 | –34.1 | 1,614 | –2.5 | 6,156 | –2.5 | 33,231 | 7.2 |
| 2003–04 | 14,231 | 1.2 | 14,110 | 8.5 | 28,341 | 4.7 | 4,163 | 5.7 | 557 | –7.9 | 1,614 | — | 6,334 | 2.9 | 34,674 | 4.3 |
| 2004–05 | 14,893 | 4.7 | 15,076 | 6.8 | 29,970 | 5.7 | 4,297 | 3.2 | 682 | 22.5 | 1,820 | 12.8 | 6,800 | 7.4 | 36,769 | 6.0 |
| 2005–06 | 14,829 | –0.4 | 16,344 | 8.4 | 31,173 | 4.0 | 4,316 | 0.5 | 757 | 10.9 | 1,868 | 2.7 | 6,942 | 2.1 | 38,115 | 3.7 |
| 2006–07 | 15,150 | 2.2 | 17,689 | 8.2 | 32,839 | 5.3 | 4,557 | 5.6 | 717 | –5.3 | 2,049 | 9.7 | 7,323 | 5.5 | 40,162 | 5.4 |
| 2007–08 | 16,504 | 8.9 | 18,604 | 5.2 | 35,108 | 6.9 | 4,772 | 4.7 | 903 | 26.0 | 1,976 | –3.6 | 7,651 | 4.5 | 42,759 | 6.5 |
| 2008–09 | 18,264 | 10.7 | 18,389 | –1.2 | 36,653 | 4.4 | 5,276 | 10.6 | 2,041 | 126.0 | 1,963 | –0.6 | 9,280 | 21.3 | 45,933 | 7.4 |
| 2009–10 | 17,844 | –2.3 | 20,658 | 12.3 | 38,502 | 5.0 | 5,343 | 1.3 | 2,243 | 9.9 | 1,948 | –0.8 | 9,534 | 2.7 | 48,036 | 4.6 |
| 2010–11 | 19,370 | 8.6 | 21,208 | 2.7 | 40,578 | 5.4 | 5,684 | 6.4 | 2,564 | 14.3 | 2,106 | 8.1 | 10,353 | 8.6 | 50,931 | 6.0 |
| 2011–12 | 19,536 | 0.9 | 22,905 | 8.0 | 42,441 | 4.6 | 6,287 | 10.6 | 2,450 | –4.4 | 2,331 | 10.7 | 11,068 | 6.9 | 53,509 | 5.1 |
| Average annual growth rate (%) | | | | | | | | | | | | | | | | |
| 2001–02 to 2006–07 | 2.7 | | 9.2 | | 5.9 | | 4.0 | | –4.8 | | 4.4 | | 3.0 | | 5.3 | |
| 2006–07 to 2011–12 | 5.2 | | 5.3 | | 5.3 | | 6.6 | | 27.9 | | 2.6 | | 8.6 | | 5.9 | |
| 2001–02 to 2011–12 | 3.9 | | 7.2 | | 5.6 | | 5.3 | | 10.3 | | 3.5 | | 5.8 | | 5.6 | |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A11: Total expenditure on public hospitals, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Private health insurance | | Individuals | | Other non-government | | Total non-government | | Total | |
|---------------------------------------|-----------------------|------------|---------------------------|------------|------------------|------------|--------------------------|------------|--------------|------------|----------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 10,862 | .. | 11,407 | .. | 22,269 | .. | 378 | .. | 514 | .. | 1,008 | .. | 1,900 | .. | 24,169 | .. |
| 2002–03 | 11,513 | 6.0 | 12,621 | 10.6 | 24,134 | 8.4 | 406 | 7.3 | 409 | –20.3 | 989 | –1.9 | 1,804 | –5.1 | 25,938 | 7.3 |
| 2003–04 | 11,567 | 0.5 | 13,832 | 9.6 | 25,399 | 5.2 | 441 | 8.6 | 227 | –44.6 | 983 | –0.6 | 1,651 | –8.5 | 27,049 | 4.3 |
| 2004–05 | 12,104 | 4.6 | 14,791 | 6.9 | 26,895 | 5.9 | 491 | 11.5 | 357 | 57.5 | 1,136 | 15.6 | 1,985 | 20.3 | 28,880 | 6.8 |
| 2005–06 | 12,005 | –0.8 | 16,047 | 8.5 | 28,051 | 4.3 | 506 | 2.9 | 418 | 16.9 | 1,159 | 2.0 | 2,083 | 4.9 | 30,134 | 4.3 |
| 2006–07 | 12,285 | 2.3 | 17,397 | 8.4 | 29,682 | 5.8 | 553 | 9.4 | 281 | –32.6 | 1,436 | 23.8 | 2,270 | 9.0 | 31,952 | 6.0 |
| 2007–08 | 13,389 | 9.0 | 18,299 | 5.2 | 31,688 | 6.8 | 589 | 6.4 | 527 | 87.2 | 1,338 | –6.8 | 2,453 | 8.1 | 34,141 | 6.9 |
| 2008–09 | 15,148 | 13.1 | 18,003 | –1.6 | 33,151 | 4.6 | 664 | 12.8 | 1,050 | 99.4 | 1,158 | –13.4 | 2,872 | 17.1 | 36,023 | 5.5 |
| 2009–10 | 14,404 | –4.9 | 20,263 | 12.6 | 34,667 | 4.6 | 667 | 0.4 | 969 | –7.7 | 1,301 | 12.3 | 2,937 | 2.3 | 37,604 | 4.4 |
| 2010–11 | 15,811 | 9.8 | 20,748 | 2.4 | 36,560 | 5.5 | 686 | 2.9 | 1,185 | 22.3 | 1,479 | 13.7 | 3,350 | 14.1 | 39,910 | 6.1 |
| 2011–12 | 16,072 | 1.6 | 22,411 | 8.0 | 38,483 | 5.3 | 805 | 17.3 | 1,117 | –5.8 | 1,630 | 10.2 | 3,552 | 6.0 | 42,034 | 5.3 |
| Average annual growth rate (%) | | | | | | | | | | | | | | | | |
| 2001–02 to 2006–07 | | 2.5 | | 8.8 | | 5.9 | | 7.9 | | –11.3 | | 7.3 | | 3.6 | | 5.7 |
| 2006–07 to 2011–12 | | 5.5 | | 5.2 | | 5.3 | | 7.8 | | 31.7 | | 2.6 | | 9.4 | | 5.6 |
| 2001–02 to 2011–12 | | 4.0 | | 7.0 | | 5.6 | | 7.8 | | 8.1 | | 4.9 | | 6.5 | | 5.7 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A12: Total expenditure on private hospitals, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Private health insurance | | Individuals | | Other non-government | | Total non-government | | Total | |
|---------------------------------------|-----------------------|------------|---------------------------|------------|------------------|------------|--------------------------|------------|--------------|------------|----------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 2,430 | .. | .. | .. | 2,430 | .. | 3,359 | .. | 405 | .. | 648 | .. | 4,412 | .. | 6,842 | .. |
| 2002–03 | 2,554 | 5.1 | 386 | –88.8 | 2,941 | 21.0 | 3,531 | 5.1 | 196 | –51.7 | 625 | –3.5 | 4,352 | –1.4 | 7,292 | 6.6 |
| 2003–04 | 2,664 | 4.3 | 278 | –28.0 | 2,942 | — | 3,722 | 5.4 | 330 | 68.6 | 631 | 0.9 | 4,683 | 7.6 | 7,625 | 4.6 |
| 2004–05 | 2,790 | 4.7 | 285 | 2.5 | 3,075 | 4.5 | 3,806 | 2.2 | 325 | –1.6 | 684 | 8.5 | 4,815 | 2.8 | 7,889 | 3.5 |
| 2005–06 | 2,824 | 1.2 | 298 | 4.4 | 3,122 | 1.5 | 3,811 | 0.1 | 339 | 4.4 | 709 | 3.7 | 4,859 | 0.9 | 7,981 | 1.2 |
| 2006–07 | 2,865 | 1.4 | 292 | –1.8 | 3,157 | 1.1 | 4,004 | 5.1 | 435 | 28.3 | 613 | –13.5 | 5,053 | 4.0 | 8,210 | 2.9 |
| 2007–08 | 3,115 | 8.7 | 305 | 4.4 | 3,420 | 8.3 | 4,184 | 4.5 | 376 | –13.6 | 637 | 3.9 | 5,198 | 2.9 | 8,618 | 5.0 |
| 2008–09 | 3,116 | — | 386 | 26.6 | 3,502 | 2.4 | 4,612 | 10.2 | 990 | 163.3 | 805 | 26.3 | 6,407 | 23.3 | 9,909 | 15.0 |
| 2009–10 | 3,440 | 10.4 | 395 | 2.4 | 3,835 | 9.5 | 4,676 | 1.4 | 1,274 | 28.6 | 647 | –19.6 | 6,597 | 3.0 | 10,432 | 5.3 |
| 2010–11 | 3,559 | 3.5 | 460 | 16.3 | 4,019 | 4.8 | 4,998 | 6.9 | 1,379 | 8.2 | 627 | –3.1 | 7,003 | 6.2 | 11,021 | 5.6 |
| 2011–12 | 3,464 | –2.7 | 494 | 7.5 | 3,958 | –1.5 | 5,483 | 9.7 | 1,334 | –3.3 | 701 | 11.8 | 7,517 | 7.3 | 11,475 | 4.1 |
| Average annual growth rate (%) | | | | | | | | | | | | | | | | |
| 2001–02 to 2006–07 | | 3.4 | | –39.0 | | 5.4 | | 3.6 | | 1.4 | | –1.1 | | 2.7 | | 3.7 |
| 2006–07 to 2011–12 | | 3.9 | | 11.1 | | 4.6 | | 6.5 | | 25.1 | | 2.7 | | 8.3 | | 6.9 |
| 2001–02 to 2011–12 | | 3.6 | | –17.7 | | 5.0 | | 5.0 | | 12.6 | | 0.8 | | 5.5 | | 5.3 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A13: Australian Government funding of hospitals, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|------------|------------|------------|-----------|-----------|------------|------------|-----------|------------------|
| 2001–02 | 685 | 663 | 714 | 685 | 751 | 644 | 547 | 566 | 686 |
| 2002–03 | 717 | 692 | 745 | 729 | 783 | 668 | 577 | 607 | 718 |
| 2003–04 | 713 | 690 | 750 | 735 | 767 | 699 | 582 | 673 | 718 |
| 2004–05 | 741 | 718 | 770 | 763 | 793 | 704 | 596 | 679 | 743 |
| 2005–06 | 729 | 701 | 758 | 726 | 796 | 696 | 585 | 802 | 730 |
| 2006–07 | 728 | 719 | 755 | 728 | 795 | 723 | 601 | 795 | 734 |
| 2007–08 | 780 | 766 | 795 | 774 | 840 | 900 | 698 | 831 | 785 |
| 2008–09 | 846 | 831 | 868 | 811 | 918 | 978 | 772 | 867 | 850 |
| 2009–10 | 819 | 782 | 831 | 789 | 874 | 991 | 725 | 888 | 816 |
| 2010–11 | 875 | 864 | 893 | 851 | 899 | 879 | 791 | 832 | 874 |
| 2011–12 | 871 | 871 | 879 | 807 | 902 | 861 | 848 | 920 | 868 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 1.2 | 1.6 | 1.1 | 1.2 | 1.1 | 2.3 | 1.9 | 7.0 | 1.4 |
| 2006–07 to 2011–12 | 3.7 | 3.9 | 3.1 | 2.1 | 2.6 | 3.6 | 7.1 | 3.0 | 3.4 |
| 2001–02 to 2011–12 | 2.4 | 2.8 | 2.1 | 1.7 | 1.8 | 2.9 | 4.5 | 5.0 | 2.4 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A14: Australian Government funding of public hospitals, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | VIC | Qld | WA | SA | Tas | ACT | NT | Australia |
|--|-----|-----|-----|-----|-----|-----|-----|-----|-----------|
| 2001–02 | 580 | 542 | 542 | 557 | 632 | 496 | 449 | 526 | 560 |
| 2002–03 | 609 | 563 | 566 | 593 | 662 | 519 | 479 | 566 | 587 |
| 2003–04 | 601 | 560 | 563 | 593 | 651 | 544 | 484 | 633 | 583 |
| 2004–05 | 624 | 583 | 580 | 609 | 667 | 561 | 496 | 640 | 604 |
| 2005–06 | 614 | 563 | 569 | 577 | 668 | 557 | 487 | 760 | 591 |
| 2006–07 | 612 | 581 | 570 | 579 | 669 | 581 | 501 | 752 | 596 |
| 2007–08 | 657 | 617 | 599 | 614 | 703 | 750 | 588 | 786 | 637 |
| 2008–09 | 724 | 686 | 677 | 658 | 784 | 830 | 666 | 821 | 705 |
| 2009–10 | 684 | 625 | 625 | 626 | 731 | 832 | 612 | 839 | 659 |
| 2010–11 | 736 | 706 | 687 | 678 | 753 | 721 | 679 | 776 | 713 |
| 2011–12 | 734 | 721 | 683 | 647 | 769 | 714 | 691 | 868 | 714 |
| Average annual growth rates (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 1.1 | 1.4 | 1.0 | 0.8 | 1.1 | 3.2 | 2.2 | 7.4 | 1.2 |
| 2006–07 to 2011–12 | 3.7 | 4.4 | 3.7 | 2.2 | 2.9 | 4.2 | 6.6 | 2.9 | 3.7 |
| 2001–02 to 2011–12 | 2.4 | 2.9 | 2.3 | 1.5 | 2.0 | 3.7 | 4.4 | 5.1 | 2.5 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A15: Australian Government funding of private hospitals, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | VIC | Qld | WA | SA | Tas | ACT | NT | Australia |
|--|-----|-----|-----|-----|-----|------|-----|-----|-----------|
| 2001–02 | 105 | 122 | 173 | 129 | 118 | 148 | 97 | 39 | 125 |
| 2002–03 | 107 | 129 | 180 | 137 | 121 | 149 | 98 | 40 | 130 |
| 2003–04 | 112 | 130 | 187 | 142 | 117 | 154 | 98 | 40 | 134 |
| 2004–05 | 117 | 134 | 190 | 153 | 125 | 142 | 100 | 40 | 139 |
| 2005–06 | 115 | 137 | 189 | 149 | 128 | 139 | 98 | 42 | 139 |
| 2006–07 | 116 | 138 | 186 | 149 | 126 | 142 | 100 | 43 | 139 |
| 2007–08 | 123 | 149 | 197 | 160 | 137 | 151 | 110 | 46 | 148 |
| 2008–09 | 122 | 145 | 191 | 153 | 134 | 149 | 105 | 46 | 145 |
| 2009–10 | 135 | 157 | 206 | 163 | 143 | 159 | 113 | 49 | 157 |
| 2010–11 | 139 | 159 | 206 | 173 | 146 | 158 | 112 | 57 | 161 |
| 2011–12 | 137 | 150 | 196 | 160 | 133 | 147 | 158 | 52 | 154 |
| Average annual growth rates (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 2.0 | 2.6 | 1.5 | 3.0 | 1.3 | –0.9 | 0.6 | 1.6 | 2.1 |
| 2006–07 to 2011–12 | 3.3 | 1.7 | 1.1 | 1.5 | 1.0 | 0.7 | 9.4 | 3.9 | 2.1 |
| 2001–02 to 2011–12 | 2.7 | 2.1 | 1.3 | 2.2 | 1.2 | –0.1 | 4.9 | 2.8 | 2.1 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A16: Australian Government funding for public and private hospitals, constant prices^(a), 2001–02 to 2011–12

| Year | Public hospital services | | Private hospitals | | Total | |
|---------|--------------------------|-----------|-------------------|-----------|--------------|-----------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) |
| 2001–02 | 10,862 | 81.7 | 2,430 | 18.3 | 13,292 | 100.0 |
| 2002–03 | 11,513 | 81.8 | 2,554 | 18.2 | 14,067 | 100.0 |
| 2003–04 | 11,567 | 81.3 | 2,664 | 18.7 | 14,231 | 100.0 |
| 2004–05 | 12,104 | 81.3 | 2,790 | 18.7 | 14,893 | 100.0 |
| 2005–06 | 12,005 | 81.0 | 2,824 | 19.0 | 14,829 | 100.0 |
| 2006–07 | 12,285 | 81.1 | 2,865 | 18.9 | 15,150 | 100.0 |
| 2007–08 | 13,389 | 81.1 | 3,115 | 18.9 | 16,504 | 100.0 |
| 2008–09 | 15,148 | 82.9 | 3,116 | 17.1 | 18,264 | 100.0 |
| 2009–10 | 14,404 | 80.7 | 3,440 | 19.3 | 17,844 | 100.0 |
| 2010–11 | 15,811 | 81.6 | 3,559 | 18.4 | 19,370 | 100.0 |
| 2011–12 | 16,072 | 82.3 | 3,464 | 17.7 | 19,536 | 100.0 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A17: State and territory government funding of hospitals, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|------------|------------|------------|-----------|-----------|------------|------------|-----------|------------------|
| 2001–02 | 589 | 609 | 530 | 581 | 601 | 490 | 803 | 996 | 588 |
| 2002–03 | 655 | 712 | 585 | 716 | 596 | 529 | 856 | 1,240 | 663 |
| 2003–04 | 799 | 664 | 607 | 739 | 671 | 482 | 831 | 1,334 | 712 |
| 2004–05 | 897 | 673 | 574 | 777 | 761 | 534 | 853 | 1,374 | 752 |
| 2005–06 | 881 | 720 | 715 | 840 | 799 | 685 | 1,151 | 1,513 | 805 |
| 2006–07 | 894 | 710 | 865 | 925 | 906 | 789 | 1,260 | 1,614 | 858 |
| 2007–08 | 856 | 764 | 926 | 990 | 999 | 766 | 1,328 | 1,641 | 885 |
| 2008–09 | 825 | 724 | 902 | 984 | 973 | 711 | 1,424 | 1,445 | 856 |
| 2009–10 | 904 | 880 | 987 | 975 | 1,052 | 763 | 1,539 | 1,371 | 945 |
| 2010–11 | 889 | 943 | 885 | 1,036 | 1,092 | 1,024 | 1,613 | 1,799 | 956 |
| 2011–12 | 942 | 924 | 938 | 1,257 | 1,256 | 992 | 1,724 | 1,953 | 1,017 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 8.7 | 3.1 | 10.3 | 9.7 | 8.6 | 10.0 | 9.4 | 10.1 | 7.9 |
| 2006–07 to 2011–12 | 1.1 | 5.4 | 1.6 | 6.3 | 6.8 | 4.7 | 6.5 | 3.9 | 3.5 |
| 2001–02 to 2011–12 | 4.8 | 4.3 | 5.9 | 8.0 | 7.6 | 7.3 | 7.9 | 7.0 | 5.6 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A18: State and territory government funding of public hospitals, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | VIC | Qld | WA | SA | Tas | ACT | NT | Australia |
|--|-----|-----|------|-------|-------|-------|-------|-------|-----------|
| 2001–02 | 585 | 604 | 521 | 582 | 597 | 492 | 809 | 1,013 | 584 |
| 2002–03 | 650 | 705 | 575 | 716 | 592 | 530 | 861 | 1,254 | 658 |
| 2003–04 | 793 | 657 | 597 | 738 | 666 | 482 | 835 | 1,341 | 705 |
| 2004–05 | 889 | 665 | 564 | 775 | 754 | 534 | 857 | 1,374 | 744 |
| 2005–06 | 872 | 712 | 701 | 837 | 792 | 684 | 1,155 | 1,506 | 796 |
| 2006–07 | 886 | 702 | 849 | 921 | 899 | 788 | 1,264 | 1,603 | 849 |
| 2007–08 | 851 | 758 | 914 | 987 | 992 | 766 | 1,332 | 1,632 | 878 |
| 2008–09 | 823 | 720 | 892 | 981 | 968 | 712 | 1,428 | 1,439 | 852 |
| 2009–10 | 903 | 877 | 981 | 972 | 1,049 | 763 | 1,543 | 1,367 | 942 |
| 2010–11 | 890 | 943 | 883 | 1,036 | 1,091 | 1,025 | 1,615 | 1,797 | 956 |
| 2011–12 | 943 | 925 | 939 | 1,258 | 1,258 | 992 | 1,725 | 1,956 | 1,019 |
| Average annual growth rates (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 8.7 | 3.1 | 10.2 | 9.6 | 8.5 | 9.9 | 9.4 | 9.6 | 7.8 |
| 2006–07 to 2011–12 | 1.3 | 5.7 | 2.0 | 6.4 | 7.0 | 4.7 | 6.4 | 4.1 | 3.7 |
| 2001–02 to 2011–12 | 4.9 | 4.4 | 6.1 | 8.0 | 7.7 | 7.3 | 7.9 | 6.8 | 5.7 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A19: State and territory government funding for public hospitals and public hospitals share of state and territory government funding for all hospitals, constant prices^(a), for each state and territory, 2001–02 to 2011–12

| Year | NSW | | Vic | | Qld | | WA | | SA | | Tas | | ACT | | NT | | Australia | |
|---------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) |
| 2001–02 | 3,862 | 100.0 | 2,918 | 100.0 | 1,914 | 100.0 | 1,115 | 100.0 | 906 | 100.0 | 232 | 100.0 | 259 | 100.0 | 201 | 100.0 | 11,407 | 100.0 |
| 2002–03 | 4,217 | 97.5 | 3,448 | 100.0 | 2,134 | 98.6 | 1,172 | 84.4 | 899 | 99.5 | 225 | 89.6 | 279 | 100.0 | 248 | 99.1 | 12,621 | 97.0 |
| 2003–04 | 5,304 | 100.0 | 3,256 | 100.0 | 2,271 | 98.7 | 1,233 | 84.9 | 1,018 | 99.5 | 208 | 89.8 | 272 | 100.0 | 269 | 100.0 | 13,832 | 98.0 |
| 2004–05 | 5,982 | 100.0 | 3,334 | 100.0 | 2,189 | 98.4 | 1,333 | 86.0 | 1,160 | 99.5 | 231 | 89.3 | 281 | 100.0 | 280 | 100.0 | 14,791 | 98.1 |
| 2005–06 | 5,919 | 100.0 | 3,619 | 100.0 | 2,800 | 98.8 | 1,459 | 85.6 | 1,230 | 99.6 | 322 | 96.3 | 384 | 99.9 | 314 | 100.0 | 16,047 | 98.2 |
| 2006–07 | 6,065 | 100.0 | 3,626 | 100.0 | 3,470 | 98.9 | 1,691 | 88.1 | 1,409 | 99.6 | 369 | 95.1 | 426 | 100.0 | 340 | 99.9 | 17,397 | 98.3 |
| 2007–08 | 5,892 | 100.0 | 3,974 | 100.0 | 3,829 | 99.3 | 1,856 | 87.8 | 1,572 | 99.7 | 364 | 95.8 | 457 | 100.0 | 355 | 99.8 | 18,299 | 98.4 |
| 2008–09 | 5,779 | 100.0 | 3,774 | 98.0 | 3,827 | 99.3 | 1,911 | 87.9 | 1,549 | 99.7 | 343 | 96.0 | 499 | 99.9 | 320 | 99.6 | 18,003 | 97.9 |
| 2009–10 | 6,419 | 100.0 | 4,693 | 98.4 | 4,286 | 99.4 | 1,932 | 87.5 | 1,697 | 99.7 | 373 | 96.6 | 551 | 100.0 | 311 | 99.7 | 20,263 | 98.1 |
| 2010–11 | 6,386 | 100.0 | 5,104 | 98.5 | 3,901 | 99.3 | 2,068 | 86.1 | 1,778 | 99.7 | 511 | 97.9 | 587 | 99.8 | 413 | 99.7 | 20,748 | 97.8 |
| 2011–12 | 6,838 | 100.0 | 5,074 | 98.4 | 4,209 | 99.4 | 2,629 | 87.5 | 2,065 | 99.8 | 508 | 100.0 | 635 | 99.3 | 453 | 99.8 | 22,411 | 97.8 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A20: Non-government^(a) funding of hospitals, per person, constant prices^(b), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|-----|-----|------|------|-----|------|------|------|-----------|
| 2001–02 | 311 | 373 | 302 | 336 | 268 | 391 | 336 | 260 | 326 |
| 2002–03 | 314 | 340 | 288 | 307 | 292 | 362 | 344 | 230 | 314 |
| 2003–04 | 327 | 349 | 281 | 311 | 294 | 341 | 385 | 220 | 319 |
| 2004–05 | 352 | 376 | 297 | 328 | 300 | 312 | 412 | 203 | 339 |
| 2005–06 | 328 | 381 | 327 | 349 | 306 | 337 | 361 | 316 | 342 |
| 2006–07 | 358 | 393 | 332 | 355 | 307 | 328 | 325 | 258 | 355 |
| 2007–08 | 361 | 382 | 347 | 383 | 347 | 377 | 358 | 279 | 364 |
| 2008–09 | 420 | 463 | 442 | 425 | 394 | 461 | 348 | 306 | 432 |
| 2009–10 | 426 | 484 | 451 | 432 | 377 | 320 | 295 | 264 | 436 |
| 2010–11 | 450 | 517 | 499 | 471 | 388 | 342 | 296 | 260 | 467 |
| 2011–12 | 486 | 554 | 551 | 353 | 419 | 468 | 312 | 282 | 492 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 2.9 | 1.1 | 1.9 | 1.1 | 2.8 | –3.5 | –0.7 | –0.2 | 1.7 |
| 2006–07 to 2011–12 | 6.3 | 7.1 | 10.7 | –0.1 | 6.4 | 7.4 | –0.8 | 1.8 | 6.7 |
| 2001–02 to 2011–12 | 4.6 | 4.0 | 6.2 | 0.5 | 4.6 | 1.8 | –0.7 | 0.8 | 4.2 |

(a) Non-government funding includes funding from private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

(b) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A21: Non-government^(a) funding of public hospital services, per person, constant prices^(b), for each state and territory, 2001-02 to 2011-12 (\$)

| Year | NSW | VIC | Qld | WA | SA | Tas | ACT | NT | Australia |
|--|-----|-----|------|-------|------|------|-------|-------|-----------|
| 2001-02 | 124 | 131 | 42 | 65 | 45 | 125 | 107 | 95 | 98 |
| 2002-03 | 125 | 103 | 43 | 67 | 51 | 134 | 106 | 66 | 92 |
| 2003-04 | 119 | 103 | 25 | 47 | 48 | 84 | 141 | 35 | 83 |
| 2004-05 | 136 | 128 | 30 | 68 | 50 | 76 | 184 | 29 | 99 |
| 2005-06 | 123 | 140 | 44 | 85 | 52 | 95 | 166 | 82 | 102 |
| 2006-07 | 136 | 144 | 56 | 82 | 60 | 91 | 150 | 66 | 109 |
| 2007-08 | 142 | 133 | 74 | 87 | 96 | 102 | 206 | 70 | 116 |
| 2008-09 | 158 | 163 | 90 | 110 | 109 | 129 | 47 | 65 | 134 |
| 2009-10 | 165 | 160 | 106 | 98 | 100 | 50 | 48 | 60 | 135 |
| 2010-11 | 175 | 179 | 136 | 125 | 101 | 68 | 54 | 53 | 152 |
| 2011-12 | 184 | 194 | 175 | 47 | 110 | 82 | 61 | 39 | 159 |
| Average annual growth rates (%) | | | | | | | | | |
| 2001-02 to 2006-07 | 1.9 | 1.9 | 5.9 | 4.6 | 6.0 | -6.2 | 7.0 | -6.9 | 2.3 |
| 2006-07 to 2011-12 | 6.2 | 6.1 | 25.5 | -10.7 | 12.7 | -2.2 | -16.4 | -10.1 | 7.7 |
| 2001-02 to 2011-12 | 4.0 | 4.0 | 15.3 | -3.3 | 9.3 | -4.2 | -5.4 | -8.5 | 4.9 |

(a) Non-government funding includes funding from private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

(b) Constant price health expenditure for 2001-02 to 2011-12 is expressed in terms of 2011-12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A22: Non-government^(a) funding for public hospitals, and public hospital share of non-government funding for all hospitals, constant prices^(b), for each state and territory, 2001–02 to 2011–12

| Year | NSW | | Vic | | Qld | | WA | | SA | | Tas | | ACT | | NT | | Australia | |
|---------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|--------------|-----------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) |
| 2001–02 | 811 | 39.8 | 633 | 35.4 | 154 | 14.1 | 124 | 19.3 | 68 | 16.7 | 59 | 31.8 | 34 | 31.5 | 19 | 35.8 | 1,900 | 30.1 |
| 2002–03 | 824 | 39.7 | 503 | 30.6 | 160 | 15.0 | 128 | 21.6 | 77 | 17.5 | 64 | 36.9 | 34 | 30.5 | 13 | 28.2 | 1,804 | 29.3 |
| 2003–04 | 791 | 36.5 | 508 | 29.7 | 94 | 8.8 | 92 | 15.0 | 73 | 16.3 | 40 | 24.5 | 46 | 36.3 | 7 | 15.7 | 1,651 | 26.1 |
| 2004–05 | 912 | 38.9 | 642 | 34.4 | 117 | 10.2 | 135 | 20.6 | 77 | 16.7 | 37 | 24.3 | 60 | 44.4 | 6 | 14.1 | 1,985 | 29.2 |
| 2005–06 | 826 | 37.6 | 708 | 36.9 | 178 | 13.7 | 173 | 24.4 | 80 | 17.0 | 46 | 28.0 | 55 | 45.7 | 17 | 26.2 | 2,083 | 30.0 |
| 2006–07 | 923 | 38.0 | 742 | 37.0 | 231 | 17.2 | 170 | 23.0 | 94 | 19.6 | 45 | 27.6 | 51 | 46.0 | 14 | 25.9 | 2,270 | 31.0 |
| 2007–08 | 973 | 39.2 | 696 | 35.0 | 311 | 21.6 | 185 | 22.7 | 152 | 27.7 | 50 | 26.8 | 70 | 57.1 | 15 | 25.3 | 2,453 | 32.1 |
| 2008–09 | 1,102 | 37.5 | 869 | 35.3 | 388 | 20.5 | 243 | 25.9 | 174 | 27.7 | 64 | 27.9 | 16 | 13.2 | 15 | 21.4 | 2,872 | 31.0 |
| 2009–10 | 1,167 | 38.6 | 868 | 33.1 | 466 | 23.6 | 220 | 22.5 | 161 | 26.4 | 25 | 15.5 | 17 | 16.0 | 14 | 22.8 | 2,937 | 30.8 |
| 2010–11 | 1,249 | 38.7 | 980 | 34.5 | 602 | 27.2 | 289 | 26.4 | 165 | 26.0 | 34 | 19.7 | 19 | 18.0 | 12 | 20.3 | 3,350 | 32.4 |
| 2011–12 | 1,324 | 37.5 | 1,078 | 34.9 | 787 | 31.6 | 110 | 13.1 | 180 | 26.0 | 41 | 17.3 | 23 | 19.5 | 9 | 13.7 | 3,552 | 32.1 |

(a) Non-government funding includes funding from private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

(b) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A23: Private health insurance funding for public and private hospitals, constant prices^(a), 2001–02 to 2011–12 (\$ million)

| Year | Public hospital services | | Private hospitals | | Total | |
|---------|--------------------------|----------------|-------------------|----------------|--------------|----------------|
| | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) |
| 2001–02 | 378 | 10.1 | 3,359 | 89.9 | 3,737 | 100.0 |
| 2002–03 | 406 | 10.3 | 3,531 | 89.7 | 3,937 | 100.0 |
| 2003–04 | 441 | 10.6 | 3,722 | 89.4 | 4,163 | 100.0 |
| 2004–05 | 491 | 11.4 | 3,806 | 88.6 | 4,297 | 100.0 |
| 2005–06 | 506 | 11.7 | 3,811 | 88.3 | 4,316 | 100.0 |
| 2006–07 | 553 | 12.1 | 4,004 | 87.9 | 4,557 | 100.0 |
| 2007–08 | 589 | 12.3 | 4,184 | 87.7 | 4,772 | 100.0 |
| 2008–09 | 664 | 12.6 | 4,612 | 87.4 | 5,276 | 100.0 |
| 2009–10 | 667 | 12.5 | 4,676 | 87.5 | 5,343 | 100.0 |
| 2010–11 | 686 | 12.1 | 4,998 | 87.9 | 5,684 | 100.0 |
| 2011–12 | 805 | 12.8 | 5,483 | 87.2 | 6,287 | 100.0 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A24: Individuals' funding for public and private hospitals, constant prices^(a), 2001-02 to 2011-12 (\$ million)

| Year | Public hospital services | | Private hospitals | | Total | |
|---------|--------------------------|----------------|-------------------|----------------|--------------|----------------|
| | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) |
| 2001-02 | 514 | 55.9 | 405 | 44.1 | 919 | 100.0 |
| 2002-03 | 409 | 67.6 | 196 | 32.4 | 605 | 100.0 |
| 2003-04 | 227 | 40.7 | 330 | 59.3 | 557 | 100.0 |
| 2004-05 | 357 | 52.4 | 325 | 47.6 | 682 | 100.0 |
| 2005-06 | 418 | 55.2 | 339 | 44.8 | 757 | 100.0 |
| 2006-07 | 281 | 39.2 | 435 | 60.8 | 717 | 100.0 |
| 2007-08 | 527 | 58.3 | 376 | 41.7 | 903 | 100.0 |
| 2008-09 | 1,050 | 51.5 | 990 | 48.5 | 2,041 | 100.0 |
| 2009-10 | 969 | 43.2 | 1,274 | 56.8 | 2,243 | 100.0 |
| 2010-11 | 1,185 | 46.2 | 1,379 | 53.8 | 2,564 | 100.0 |
| 2011-12 | 1,117 | 45.6 | 1,334 | 54.4 | 2,450 | 100.0 |

(a) Constant price health expenditure for 2001-02 to 2011-12 is expressed in terms of 2011-12 prices.

Source: AIHW health expenditure database.

Table A25: Total expenditure on primary health care, by source of funding and share of funding, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Private health insurance | | Individuals | | Other non-government ^(b) | | Total non-government | | Total | |
|---------|-----------------------|-----------|---------------------------|-----------|------------------|-----------|--------------------------|-----------|--------------|-----------|-------------------------------------|-----------|----------------------|-----------|--------------|-----------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) |
| 2001–02 | 12,968 | 42.1 | 5,264 | 17.1 | 18,231 | 59.2 | 1,400 | 4.5 | 9,734 | 31.6 | 1,456 | 4.7 | 12,590 | 40.8 | 30,821 | 100.0 |
| 2002–03 | 13,461 | 42.0 | 5,647 | 17.6 | 19,108 | 59.6 | 1,415 | 4.4 | 9,979 | 31.1 | 1,582 | 4.9 | 12,975 | 40.4 | 32,084 | 100.0 |
| 2003–04 | 13,951 | 42.1 | 5,003 | 15.1 | 18,954 | 57.2 | 1,425 | 4.3 | 11,000 | 33.2 | 1,778 | 5.4 | 14,203 | 42.8 | 33,157 | 100.0 |
| 2004–05 | 15,055 | 42.7 | 5,170 | 14.7 | 20,226 | 57.4 | 1,418 | 4.0 | 11,822 | 33.5 | 1,780 | 5.0 | 15,019 | 42.6 | 35,245 | 100.0 |
| 2005–06 | 14,832 | 41.8 | 5,427 | 15.3 | 20,259 | 57.1 | 1,434 | 4.0 | 12,144 | 34.2 | 1,672 | 4.7 | 15,250 | 42.9 | 35,509 | 100.0 |
| 2006–07 | 15,787 | 41.8 | 5,874 | 15.6 | 21,661 | 57.4 | 1,498 | 4.0 | 12,944 | 34.3 | 1,625 | 4.3 | 16,066 | 42.6 | 37,727 | 100.0 |
| 2007–08 | 17,921 | 43.9 | 6,342 | 15.5 | 24,263 | 59.4 | 1,549 | 3.8 | 13,262 | 32.5 | 1,762 | 4.3 | 16,572 | 40.6 | 40,835 | 100.0 |
| 2008–09 | 18,957 | 44.3 | 6,622 | 15.5 | 25,579 | 59.8 | 1,678 | 3.9 | 13,792 | 32.2 | 1,717 | 4.0 | 17,187 | 40.2 | 42,766 | 100.0 |
| 2009–10 | 20,261 | 44.9 | 6,548 | 14.5 | 26,809 | 59.4 | 1,659 | 3.7 | 14,889 | 33.0 | 1,772 | 3.9 | 18,320 | 40.6 | 45,129 | 100.0 |
| 2010–11 | 21,526 | 44.3 | 6,692 | 13.8 | 28,218 | 58.1 | 1,717 | 3.5 | 16,831 | 34.7 | 1,771 | 3.6 | 20,319 | 41.9 | 48,537 | 100.0 |
| 2011–12 | 22,622 | 44.7 | 7,092 | 14.0 | 29,715 | 58.7 | 1,910 | 3.8 | 17,171 | 33.9 | 1,825 | 3.6 | 20,906 | 41.3 | 50,621 | 100.0 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(b) Other non-government includes expenditure on health goods and services by workers compensation and compulsory motor vehicle third-party insurers, as well as other sources of income (for example, interest earned) of service providers.

Source: AIHW health expenditure database.

Table A26: Australian Government funding of primary health care, per person, constant prices^(a), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|-------|-----|-------|-----|-------|-------|-----|-------|-----------|
| 2001–02 | 693 | 637 | 666 | 629 | 699 | 743 | 618 | 730 | 669 |
| 2002–03 | 712 | 662 | 673 | 650 | 732 | 741 | 589 | 765 | 687 |
| 2003–04 | 722 | 679 | 690 | 664 | 751 | 770 | 688 | 847 | 704 |
| 2004–05 | 772 | 721 | 751 | 703 | 803 | 810 | 627 | 931 | 751 |
| 2005–06 | 748 | 702 | 730 | 676 | 791 | 798 | 633 | 907 | 730 |
| 2006–07 | 787 | 729 | 770 | 705 | 817 | 822 | 714 | 1,020 | 765 |
| 2007–08 | 879 | 822 | 838 | 772 | 906 | 921 | 833 | 1,332 | 853 |
| 2008–09 | 927 | 848 | 862 | 777 | 939 | 957 | 754 | 1,387 | 883 |
| 2009–10 | 969 | 892 | 912 | 798 | 1,000 | 1,037 | 753 | 1,483 | 927 |
| 2010–11 | 1,008 | 932 | 956 | 840 | 1,057 | 1,197 | 803 | 1,510 | 971 |
| 2011–12 | 1,034 | 957 | 1,009 | 863 | 1,108 | 1,141 | 948 | 1,711 | 1,005 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 2.6 | 2.7 | 2.9 | 2.3 | 3.2 | 2.0 | 2.9 | 6.9 | 2.7 |
| 2006–07 to 2011–12 | 5.6 | 5.6 | 5.6 | 4.1 | 6.3 | 6.8 | 5.8 | 10.9 | 5.6 |
| 2001–02 to 2011–12 | 4.1 | 4.2 | 4.2 | 3.2 | 4.7 | 4.4 | 4.4 | 8.9 | 4.2 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A27: State and territory government funding of primary health care, per person, constant prices^(a), for each state and territory, 2001-02 to 2011-12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|------|------|------|------|------|-------|------|-------|-----------|
| 2001-02 | 251 | 228 | 359 | 171 | 178 | 640 | 446 | 890 | 272 |
| 2002-03 | 229 | 276 | 354 | 261 | 339 | 266 | 549 | 821 | 288 |
| 2003-04 | 214 | 204 | 258 | 343 | 305 | 242 | 491 | 945 | 252 |
| 2004-05 | 218 | 204 | 267 | 357 | 313 | 256 | 488 | 954 | 258 |
| 2005-06 | 246 | 212 | 292 | 289 | 310 | 249 | 472 | 1,000 | 267 |
| 2006-07 | 259 | 223 | 289 | 395 | 300 | 335 | 433 | 962 | 285 |
| 2007-08 | 262 | 227 | 338 | 382 | 342 | 408 | 475 | 1,057 | 302 |
| 2008-09 | 257 | 221 | 372 | 351 | 364 | 401 | 487 | 1,465 | 308 |
| 2009-10 | 223 | 212 | 418 | 330 | 384 | 367 | 518 | 1,100 | 299 |
| 2010-11 | 246 | 158 | 417 | 335 | 436 | 333 | 526 | 1,569 | 302 |
| 2011-12 | 251 | 156 | 464 | 332 | 473 | 308 | 529 | 1,633 | 315 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001-02 to 2006-07 | 0.6 | -0.4 | -4.2 | 18.2 | 11.0 | -12.1 | -0.6 | 1.6 | 0.9 |
| 2006-07 to 2011-12 | -0.6 | -6.9 | 9.9 | -3.4 | 9.5 | -1.7 | 4.1 | 11.2 | 2.0 |
| 2001-02 to 2011-12 | — | -3.7 | 2.6 | 6.9 | 10.3 | -7.1 | 1.7 | 6.3 | 1.5 |

(a) Constant price health expenditure for 2001-02 to 2011-12 is expressed in terms of 2011-12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A28: Non-government^(a) funding of primary health care, per person, constant prices^(b), for each state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|-----|-------|-----|-----|-----|-----|-----|-----|-----------|
| 2001–02 | 677 | 754 | 518 | 639 | 560 | 574 | 677 | 531 | 649 |
| 2002–03 | 686 | 774 | 547 | 626 | 564 | 574 | 694 | 536 | 662 |
| 2003–04 | 742 | 813 | 614 | 676 | 652 | 589 | 771 | 563 | 716 |
| 2004–05 | 770 | 848 | 662 | 702 | 669 | 618 | 815 | 611 | 749 |
| 2005–06 | 769 | 852 | 661 | 703 | 688 | 625 | 801 | 602 | 751 |
| 2006–07 | 789 | 892 | 713 | 725 | 643 | 670 | 854 | 662 | 779 |
| 2007–08 | 804 | 865 | 729 | 792 | 677 | 679 | 771 | 667 | 789 |
| 2008–09 | 815 | 873 | 731 | 849 | 679 | 693 | 744 | 671 | 800 |
| 2009–10 | 874 | 927 | 749 | 826 | 724 | 703 | 764 | 651 | 838 |
| 2010–11 | 924 | 1,023 | 804 | 925 | 856 | 892 | 893 | 720 | 916 |
| 2011–12 | 910 | 1,061 | 815 | 957 | 853 | 979 | 902 | 744 | 929 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 3.1 | 3.4 | 6.6 | 2.6 | 2.8 | 3.1 | 4.8 | 4.5 | 3.7 |
| 2006–07 to 2011–12 | 2.9 | 3.5 | 2.7 | 5.7 | 5.8 | 7.9 | 1.1 | 2.4 | 3.6 |
| 2001–02 to 2011–12 | 3.0 | 3.5 | 4.6 | 4.1 | 4.3 | 5.5 | 2.9 | 3.4 | 3.7 |

(a) Non-government funding includes funding from private health insurers, out-of-pocket expenses paid by individuals and payments by injury compensation insurers.

(b) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A29: Total expenditure on primary health care, by area of expenditure and source of funding, current prices, by area of expenditure and source of funds, 2011–12 (\$ million)

| Area of expenditure | Government | | | | | | Non-government | | | | |
|---|-----------------------|---|--------------------------------|---------------|-----------------|---------------|------------------------|---------------|----------------------|---------------|-----------------------------|
| | Australian Government | | | | | | | | | | |
| | DVA | Dept of Health and other ^(a) | Premium rebates ^(b) | Total | State and local | Total | Health insurance funds | Individuals | Other ^(c) | Total | Total recurrent expenditure |
| Medical services (non referred) | 837 | 7,047 | . | 7,884 | — | 7,884 | . | 640 | 1,128 | 1,768 | 9,651 |
| Dental services | 104 | 956 | 528 | 1,587 | 718 | 2,305 | 1,261 | 4,736 | 34 | 6,031 | 8,336 |
| Other health practitioners | 236 | 1,061 | 250 | 1,547 | 8 | 1,555 | 599 | 1,928 | 390 | 2,916 | 4,472 |
| Community health and other ^(f) | 1 | 1,121 | — | 1,122 | 5,703 | 6,825 | 1 | 115 | 149 | 265 | 7,090 |
| Public health | — | 1,503 | — | 1,503 | 663 | 2,166 | — | 20 | 47 | 66 | 2,232 |
| Medications | 467 | 8,492 | 21 | 8,980 | — | 8,980 | 50 | 9,733 | 78 | 9,860 | 18,839 |
| Benefit-paid pharmaceuticals | 467 | 7,963 | — | 8,430 | — | 8,430 | — | 1,665 | — | 1,665 | 10,096 |
| All other medications | — | 528 | 21 | 549 | — | 549 | 50 | 8,067 | 78 | 8,195 | 8,744 |
| Total recurrent funding | 1,644 | 20,179 | 799 | 22,622 | 7,092 | 29,715 | 1,910 | 17,171 | 1,825 | 20,906 | 50,621 |

(a) 'Other' comprises other Australian Government expenditure on primary health care that is not funded by the Australian Government Department of Health.

(b) Includes the 30–40% rebate on health insurance premiums that can be claimed either directly from the Australian Government through the taxation system or it may involve a reduced premium being charged by the private health insurance fund.

(c) 'Other' includes expenditure on health goods and services by workers compensation and compulsory motor vehicle third-party insurers, as well as other sources of income (for example, interest earned) of service providers.

Source: AIHW health expenditure database.

Table A30: Total funding of primary health care expenditure, constant prices^(a), by area of expenditure, and proportion of total health expenditure, 2001–02 to 2011–12

| Year | Medical services | | Dental services | | Other health practitioners | | Community health and other | | Public health | | Benefit-paid pharmaceuticals | | All other medications | | Total recurrent funding | |
|---------|------------------|-----------|-----------------|-----------|----------------------------|-----------|----------------------------|-----------|---------------|-----------|------------------------------|-----------|-----------------------|-----------|-------------------------|-----------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) |
| 2001–02 | 7,048 | 22.9 | 5,593 | 18.1 | 3,037 | 9.9 | 4,382 | 14.2 | 1,561 | 5.1 | 5,614 | 18.2 | 3,586 | 11.6 | 30,821 | 100.0 |
| 2002–03 | 7,005 | 21.8 | 5,755 | 17.9 | 3,220 | 10.0 | 4,818 | 15.0 | 1,711 | 5.3 | 6,223 | 19.4 | 3,352 | 10.4 | 32,084 | 100.0 |
| 2003–04 | 7,063 | 21.3 | 5,844 | 17.6 | 3,392 | 10.2 | 4,586 | 13.8 | 1,715 | 5.2 | 6,806 | 20.5 | 3,752 | 11.3 | 33,157 | 100.0 |
| 2004–05 | 7,479 | 21.2 | 6,130 | 17.4 | 3,482 | 9.9 | 4,837 | 13.7 | 1,906 | 5.4 | 7,192 | 20.4 | 4,220 | 12.0 | 35,245 | 100.0 |
| 2005–06 | 7,221 | 20.3 | 6,133 | 17.3 | 3,602 | 10.1 | 5,006 | 14.1 | 1,853 | 5.2 | 7,388 | 20.8 | 4,305 | 12.1 | 35,509 | 100.0 |
| 2006–07 | 7,501 | 19.9 | 6,306 | 16.7 | 3,805 | 10.1 | 5,407 | 14.3 | 2,074 | 5.5 | 7,595 | 20.1 | 5,038 | 13.4 | 37,727 | 100.0 |
| 2007–08 | 8,252 | 20.2 | 6,473 | 15.9 | 3,926 | 9.6 | 5,979 | 14.6 | 2,516 | 6.2 | 8,189 | 20.1 | 5,500 | 13.5 | 40,835 | 100.0 |
| 2008–09 | 8,359 | 19.5 | 7,052 | 16.5 | 3,828 | 9.0 | 5,906 | 13.8 | 2,411 | 5.6 | 8,961 | 21.0 | 6,249 | 14.6 | 42,766 | 100.0 |
| 2009–10 | 8,837 | 19.6 | 7,775 | 17.2 | 4,074 | 9.0 | 6,103 | 13.5 | 2,082 | 4.6 | 9,616 | 21.3 | 6,642 | 14.7 | 45,129 | 100.0 |
| 2010–11 | 9,445 | 19.5 | 7,878 | 16.2 | 4,322 | 8.9 | 6,455 | 13.3 | 1,994 | 4.1 | 9,775 | 20.1 | 8,668 | 17.9 | 48,537 | 100.0 |
| 2011–12 | 9,651 | 19.1 | 8,336 | 16.5 | 4,472 | 8.8 | 7,090 | 14.0 | 2,232 | 4.4 | 10,096 | 19.9 | 8,744 | 17.3 | 50,621 | 100.0 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A31: Total expenditure on other areas of health spending, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Private health insurance | | Individuals | | Other non-government ^(b) | | Total non-government | | Total | |
|---------------------------------------|-----------------------|------------|---------------------------|------------|------------------|------------|--------------------------|------------|--------------|------------|-------------------------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 10,341 | .. | 1,445 | .. | 11,786 | .. | 1,794 | .. | 3,027 | .. | 296 | .. | 5,117 | .. | 16,903 | .. |
| 2002–03 | 10,704 | 3.5 | 1,640 | 13.5 | 12,343 | 4.7 | 1,878 | 4.7 | 3,333 | 10.1 | 334 | 13.0 | 5,546 | 8.4 | 17,889 | 5.8 |
| 2003–04 | 11,104 | 3.7 | 1,922 | 17.2 | 13,026 | 5.5 | 1,916 | 2.0 | 3,444 | 3.3 | 309 | –7.7 | 5,668 | 2.2 | 18,694 | 4.5 |
| 2004–05 | 11,868 | 6.9 | 2,158 | 12.3 | 14,026 | 7.7 | 1,914 | –0.1 | 3,521 | 2.2 | 316 | 2.5 | 5,752 | 1.5 | 19,778 | 5.8 |
| 2005–06 | 12,283 | 3.5 | 2,074 | –3.9 | 14,357 | 2.4 | 1,957 | 2.2 | 3,684 | 4.6 | 332 | 5.0 | 5,973 | 3.8 | 20,330 | 2.8 |
| 2006–07 | 12,785 | 4.1 | 2,129 | 2.6 | 14,914 | 3.9 | 2,095 | 7.0 | 4,011 | 8.9 | 343 | 3.3 | 6,449 | 8.0 | 21,363 | 5.1 |
| 2007–08 | 13,839 | 8.2 | 2,226 | 4.6 | 16,065 | 7.7 | 2,324 | 10.9 | 4,096 | 2.1 | 359 | 4.5 | 6,778 | 5.1 | 22,843 | 6.9 |
| 2008–09 | 15,222 | 10.0 | 2,798 | 25.7 | 18,020 | 12.2 | 2,477 | 6.6 | 4,419 | 7.9 | 488 | 36.1 | 7,384 | 8.9 | 25,404 | 11.2 |
| 2009–10 | 15,880 | 4.3 | 2,981 | 6.6 | 18,861 | 4.7 | 2,453 | –1.0 | 4,771 | 8.0 | 451 | –7.6 | 7,675 | 3.9 | 26,536 | 4.5 |
| 2010–11 | 15,132 | –4.7 | 3,175 | 6.5 | 18,307 | –2.9 | 2,640 | 7.6 | 5,092 | 6.7 | 429 | –4.8 | 8,162 | 6.3 | 26,468 | –0.3 |
| 2011–12 | 16,488 | 9.0 | 3,182 | 0.2 | 19,671 | 7.5 | 2,968 | 12.4 | 5,174 | 1.6 | 444 | 3.4 | 8,585 | 5.2 | 28,256 | 6.8 |
| Average annual growth rate (%) | | | | | | | | | | | | | | | | |
| 2001–02 to 2006–07 | 4.3 | | 8.1 | | 4.8 | | 3.2 | | 5.8 | | 3.0 | | 4.7 | | 4.8 | |
| 2006–07 to 2011–12 | 5.2 | | 8.4 | | 5.7 | | 7.2 | | 5.2 | | 5.3 | | 5.9 | | 5.8 | |
| 2001–02 to 2011–12 | 4.8 | | 8.2 | | 5.3 | | 5.2 | | 5.5 | | 4.1 | | 5.3 | | 5.3 | |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(b) Other non-government includes expenditure on health goods and services by workers compensation and compulsory motor vehicle third-party insurers, as well as other sources of income (for example, interest earned) of service providers.

Source: AIHW health expenditure database.

Table A32: Total funding of other health expenditure, by area of expenditure, and proportion of total other health expenditure, constant prices^(a), 2001–02 to 2011–12

| Year | Patient transport services | | Referred medical services | | Aids and appliances | | Administration | | Research | | Total |
|---------|----------------------------|----------------|---------------------------|----------------|---------------------|----------------|----------------|----------------|--------------|----------------|--------------|
| | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) | Amount (\$m) | Proportion (%) | Amount (\$m) |
| 2001–02 | 1,396 | 8.3 | 9,048 | 53.5 | 2,015 | 11.9 | 2,582 | 15.3 | 1,862 | 11.0 | 16,903 |
| 2002–03 | 1,565 | 8.8 | 9,372 | 52.4 | 2,148 | 12.0 | 2,844 | 15.9 | 1,960 | 11.0 | 17,889 |
| 2003–04 | 1,717 | 9.2 | 9,659 | 51.7 | 2,228 | 11.9 | 2,984 | 16.0 | 2,106 | 11.3 | 18,694 |
| 2004–05 | 1,824 | 9.2 | 10,120 | 51.2 | 2,446 | 12.4 | 3,117 | 15.8 | 2,271 | 11.5 | 19,778 |
| 2005–06 | 1,821 | 9.0 | 10,405 | 51.2 | 2,549 | 12.5 | 2,989 | 14.7 | 2,566 | 12.6 | 20,330 |
| 2006–07 | 2,045 | 9.6 | 10,986 | 51.4 | 2,694 | 12.6 | 2,837 | 13.3 | 2,800 | 13.1 | 21,363 |
| 2007–08 | 2,224 | 9.7 | 11,769 | 51.5 | 2,697 | 11.8 | 3,014 | 13.2 | 3,138 | 13.7 | 22,843 |
| 2008–09 | 2,576 | 10.1 | 12,561 | 49.4 | 2,883 | 11.3 | 3,328 | 13.1 | 4,056 | 16.0 | 25,404 |
| 2009–10 | 2,688 | 10.1 | 13,067 | 49.2 | 3,244 | 12.2 | 3,043 | 11.5 | 4,494 | 16.9 | 26,536 |
| 2010–11 | 2,852 | 10.8 | 13,474 | 50.9 | 3,580 | 13.5 | 2,111 | 8.0 | 4,452 | 16.8 | 26,468 |
| 2011–12 | 2,991 | 10.6 | 14,249 | 50.4 | 3,687 | 13.0 | 2,390 | 8.5 | 4,939 | 17.5 | 28,256 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A33: Total expenditure on patient transport services, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Private health insurance | | Individuals | | Other non-government ^(b) | | Total non-government | | Total | |
|---------------------------------------|-----------------------|------------|---------------------------|------------|------------------|------------|--------------------------|------------|--------------|------------|-------------------------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 157 | .. | 757 | .. | 915 | .. | 123 | .. | 278 | .. | 80 | .. | 481 | .. | 1,396 | .. |
| 2002–03 | 168 | 6.8 | 870 | 14.8 | 1,038 | 13.4 | 125 | 1.5 | 294 | 6.0 | 108 | 34.9 | 528 | 9.7 | 1,565 | 12.1 |
| 2003–04 | 182 | 8.4 | 1,095 | 25.9 | 1,277 | 23.1 | 118 | –5.8 | 226 | –23.1 | 96 | –11.7 | 440 | –16.6 | 1,717 | 9.7 |
| 2004–05 | 200 | 9.8 | 1,178 | 7.6 | 1,378 | 7.9 | 121 | 2.2 | 233 | 2.8 | 93 | –3.1 | 446 | 1.3 | 1,824 | 6.2 |
| 2005–06 | 191 | –4.2 | 1,182 | 0.3 | 1,373 | –0.4 | 114 | –5.5 | 247 | 6.2 | 86 | –7.0 | 447 | 0.3 | 1,821 | –0.2 |
| 2006–07 | 216 | 12.8 | 1,363 | 15.4 | 1,579 | 15.0 | 121 | 5.9 | 266 | 7.7 | 79 | –8.7 | 466 | 4.1 | 2,045 | 12.3 |
| 2007–08 | 280 | 29.8 | 1,441 | 5.7 | 1,721 | 9.0 | 141 | 16.8 | 286 | 7.5 | 76 | –3.4 | 503 | 8.1 | 2,224 | 8.8 |
| 2008–09 | 287 | 2.5 | 1,679 | 16.5 | 1,967 | 14.3 | 157 | 11.3 | 358 | 24.8 | 95 | 25.5 | 610 | 21.1 | 2,576 | 15.8 |
| 2009–10 | 292 | 1.5 | 1,747 | 4.1 | 2,039 | 3.7 | 162 | 3.3 | 369 | 3.3 | 118 | 23.4 | 649 | 6.5 | 2,688 | 4.3 |
| 2010–11 | 290 | –0.5 | 1,918 | 9.8 | 2,208 | 8.3 | 166 | 2.7 | 373 | 1.0 | 104 | –11.6 | 644 | –0.9 | 2,852 | 6.1 |
| 2011–12 | 281 | –3.1 | 2,084 | 8.7 | 2,365 | 7.1 | 179 | 7.7 | 351 | –6.0 | 96 | –8.0 | 626 | –2.8 | 2,991 | 4.9 |
| Average annual growth rate (%) | | | | | | | | | | | | | | | | |
| 2001–02 to 2006–07 | 6.6 | | 12.5 | | 11.5 | | –0.3 | | –0.9 | | –0.3 | | –0.6 | | 7.9 | |
| 2006–07 to 2011–12 | 5.4 | | 8.9 | | 8.4 | | 8.1 | | 5.7 | | 4.0 | | 6.1 | | 7.9 | |
| 2001–02 to 2011–12 | 6.0 | | 10.7 | | 10.0 | | 3.8 | | 2.4 | | 1.8 | | 2.7 | | 7.9 | |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(b) Other non-government includes expenditure on health goods and services by workers compensation and compulsory motor vehicle third-party insurers, as well as other sources of income (for example, interest earned) of service providers.

Source: AIHW health expenditure database.

Table A34: Total expenditure on referred medical services, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | Total government | | Private health insurance | | Individuals | | Total non-government | | Total | |
|---------------------------------------|-----------------------|------------|------------------|------------|--------------------------|------------|--------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 7,154 | .. | 7,154 | .. | 599 | .. | 1,295 | .. | 1,894 | .. | 9,048 | .. |
| 2002–03 | 7,277 | 1.7 | 7,277 | 1.7 | 675 | 12.8 | 1,419 | 9.6 | 2,095 | 10.6 | 9,372 | 3.6 |
| 2003–04 | 7,433 | 2.1 | 7,433 | 2.1 | 728 | 7.7 | 1,498 | 5.6 | 2,226 | 6.3 | 9,659 | 3.1 |
| 2004–05 | 7,921 | 6.6 | 7,921 | 6.6 | 732 | 0.5 | 1,467 | –2.1 | 2,199 | –1.2 | 10,120 | 4.8 |
| 2005–06 | 8,109 | 2.4 | 8,109 | 2.4 | 758 | 3.6 | 1,539 | 4.9 | 2,297 | 4.4 | 10,405 | 2.8 |
| 2006–07 | 8,436 | 4.0 | 8,436 | 4.0 | 811 | 7.0 | 1,740 | 13.1 | 2,550 | 11.0 | 10,986 | 5.6 |
| 2007–08 | 9,032 | 7.1 | 9,032 | 7.1 | 888 | 9.5 | 1,849 | 6.3 | 2,737 | 7.3 | 11,769 | 7.1 |
| 2008–09 | 9,610 | 6.4 | 9,610 | 6.4 | 971 | 9.3 | 1,980 | 7.1 | 2,951 | 7.8 | 12,561 | 6.7 |
| 2009–10 | 9,954 | 3.6 | 9,954 | 3.6 | 986 | 1.5 | 2,127 | 7.4 | 3,113 | 5.5 | 13,067 | 4.0 |
| 2010–11 | 10,176 | 2.2 | 10,176 | 2.2 | 1,071 | 8.6 | 2,228 | 4.7 | 3,298 | 6.0 | 13,474 | 3.1 |
| 2011–12 | 10,733 | 5.5 | 10,733 | 5.5 | 1,200 | 12.1 | 2,315 | 3.9 | 3,515 | 6.6 | 14,249 | 5.7 |
| Average annual growth rate (%) | | | | | | | | | | | | |
| 2001–02 to 2006–07 | | 3.4 | | 3.4 | | 6.2 | | 6.1 | | 6.1 | | 4.0 |
| 2006–07 to 2011–12 | | 4.9 | | 4.9 | | 8.2 | | 5.9 | | 6.6 | | 5.3 |
| 2001–02 to 2011–12 | | 4.1 | | 4.1 | | 7.2 | | 6.0 | | 6.4 | | 4.6 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A35: Total expenditure on aids and appliances, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | Total government | | Private health insurance | | Individuals | | Other non-government ^(b) | | Total non-government | | Total | |
|---------------------------------------|-----------------------|------------|--------------------|------------|--------------------------|------------|--------------|------------|-------------------------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 211 | .. | 260 ^(c) | .. | 244 | .. | 1,454 | .. | 57 | .. | 1,755 | .. | 2,015 | .. |
| 2002–03 | 226 | 7.5 | 226 | –13.0 | 248 | 1.5 | 1,620 | 11.4 | 54 | –5.0 | 1,922 | 9.5 | 2,148 | 6.6 |
| 2003–04 | 226 | –0.2 | 226 | –0.2 | 251 | 1.2 | 1,719 | 6.1 | 33 | –39.7 | 2,003 | 4.2 | 2,228 | 3.7 |
| 2004–05 | 344 | 52.2 | 344 | 52.2 | 246 | –1.7 | 1,821 | 5.9 | 34 | 5.4 | 2,102 | 5.0 | 2,446 | 9.8 |
| 2005–06 | 361 | 5.1 | 361 | 5.1 | 251 | 1.9 | 1,898 | 4.2 | 38 | 11.8 | 2,188 | 4.1 | 2,549 | 4.2 |
| 2006–07 | 380 | 5.2 | 380 | 5.2 | 269 | 7.1 | 2,005 | 5.6 | 40 | 4.6 | 2,314 | 5.8 | 2,694 | 5.7 |
| 2007–08 | 416 | 9.5 | 416 | 9.5 | 281 | 4.5 | 1,961 | –2.2 | 39 | –2.2 | 2,281 | –1.4 | 2,697 | 0.1 |
| 2008–09 | 459 | 10.4 | 459 | 10.4 | 321 | 14.0 | 2,060 | 5.1 | 43 | 10.5 | 2,424 | 6.3 | 2,883 | 6.9 |
| 2009–10 | 558 | 21.4 | 558 | 21.4 | 365 | 13.8 | 2,275 | 10.4 | 47 | 7.5 | 2,686 | 10.8 | 3,244 | 12.5 |
| 2010–11 | 611 | 9.6 | 611 | 9.6 | 425 | 16.6 | 2,488 | 9.4 | 55 | 18.8 | 2,969 | 10.5 | 3,580 | 10.4 |
| 2011–12 | 631 | 3.3 | 631 | 3.3 | 488 | 14.9 | 2,503 | 0.6 | 65 | 16.8 | 3,056 | 2.9 | 3,687 | 3.0 |
| Average annual growth rate (%) | | | | | | | | | | | | | | |
| 2001–02 to 2006–07 | 12.5 | | 7.9 | | 2.0 | | 6.6 | | –6.8 | | 5.7 | | 6.0 | |
| 2006–07 to 2011–12 | 10.7 | | 10.7 | | 12.7 | | 4.5 | | 10.2 | | 5.7 | | 6.5 | |
| 2001–02 to 2011–12 | 11.6 | | 9.3 | | 7.2 | | 5.6 | | 1.3 | | 5.7 | | 6.2 | |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

(b) Other non-government includes expenditure on health goods and services by workers compensation and compulsory motor vehicle third-party insurers, as well as other sources of income (for example, interest earned) of service providers.

(c) Includes \$50 million state and territory government funding in 2001–02.

Source: AIHW health expenditure database.

Table A36: Individuals' funding of aids and appliances, constant prices^(a), per person, for state and territory, 2001–02 to 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------------------------------------|-----|-----|-----|------|------|-----|-----|------|-----------|
| 2001–02 | 53 | 95 | 76 | 104 | 82 | 67 | 53 | 39 | 75 |
| 2002–03 | 55 | 101 | 82 | 136 | 90 | 74 | 54 | 42 | 83 |
| 2003–04 | 59 | 104 | 88 | 140 | 94 | 78 | 54 | 58 | 87 |
| 2004–05 | 60 | 108 | 91 | 158 | 96 | 81 | 54 | 60 | 91 |
| 2005–06 | 61 | 111 | 93 | 165 | 98 | 88 | 55 | 61 | 93 |
| 2006–07 | 63 | 114 | 97 | 177 | 100 | 94 | 58 | 66 | 97 |
| 2007–08 | 63 | 103 | 93 | 174 | 98 | 90 | 58 | 62 | 93 |
| 2008–09 | 61 | 115 | 93 | 187 | 82 | 93 | 56 | 66 | 96 |
| 2009–10 | 63 | 129 | 104 | 198 | 87 | 104 | 57 | 68 | 104 |
| 2010–11 | 67 | 142 | 111 | 212 | 93 | 108 | 60 | 76 | 112 |
| 2011–12 | 66 | 143 | 108 | 208 | 92 | 102 | 58 | 69 | 111 |
| Average annual growth rate (%) | | | | | | | | | |
| 2001–02 to 2006–07 | 3.5 | 3.7 | 5.0 | 11.2 | 4.0 | 7.0 | 1.8 | 11.1 | 5.3 |
| 2006–07 to 2011–12 | 0.9 | 4.6 | 2.2 | 3.3 | –1.7 | 1.6 | — | 0.9 | 2.7 |
| 2001–02 to 2011–12 | 2.2 | 4.2 | 3.6 | 7.2 | 1.2 | 4.3 | 0.9 | 5.9 | 4.0 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Sources: AIHW health expenditure database; ABS 2013b.

Table A37: Total expenditure on health administration, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Total non-government | | Total | |
|---------------------------------------|-----------------------|------------|---------------------------|------------|------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 1,389 | .. | 364 | .. | 1,753 | .. | 828 | .. | 2,582 | .. |
| 2002–03 | 1,485 | 6.9 | 529 | 45.2 | 2,014 | 14.9 | 830 | 0.2 | 2,844 | 10.2 |
| 2003–04 | 1,617 | 8.9 | 548 | 3.5 | 2,165 | 7.5 | 820 | –1.2 | 2,984 | 4.9 |
| 2004–05 | 1,626 | 0.6 | 676 | 23.3 | 2,302 | 6.3 | 816 | –0.5 | 3,117 | 4.5 |
| 2005–06 | 1,604 | –1.3 | 551 | –18.4 | 2,155 | –6.4 | 834 | 2.3 | 2,989 | –4.1 |
| 2006–07 | 1,565 | –2.4 | 378 | –31.4 | 1,943 | –9.8 | 894 | 7.2 | 2,837 | –5.1 |
| 2007–08 | 1,659 | 6.0 | 342 | –9.6 | 2,000 | 2.9 | 1,013 | 13.3 | 3,014 | 6.2 |
| 2008–09 | 1,821 | 9.8 | 436 | 27.8 | 2,257 | 12.8 | 1,071 | 5.7 | 3,328 | 10.4 |
| 2009–10 | 1,633 | –10.3 | 451 | 3.3 | 2,084 | –7.7 | 959 | –10.5 | 3,043 | –8.6 |
| 2010–11 | 665 | –59.3 | 461 | 2.3 | 1,126 | –46.0 | 985 | 2.7 | 2,111 | –30.6 |
| 2011–12 | 988 | 48.4 | 300 | –34.8 | 1,288 | 14.4 | 1,102 | 11.9 | 2,390 | 13.2 |
| Average annual growth rate (%) | | | | | | | | | | |
| 2001–02 to 2006–07 | | 2.4 | | 0.8 | | 2.1 | | 1.5 | | 1.9 |
| 2006–07 to 2011–12 | | –8.8 | | –4.5 | | –7.9 | | 4.3 | | –3.4 |
| 2001–02 to 2011–12 | | –3.3 | | –1.9 | | –3.0 | | 2.9 | | –0.8 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A38: Total expenditure on health research, by source of funding and annual growth rates, constant prices^(a), 2001–02 to 2011–12

| Year | Australian Government | | State/territory and local | | Total government | | Total non-Government | | Total | |
|---------------------------------------|-----------------------|------------|---------------------------|------------|------------------|------------|----------------------|------------|--------------|------------|
| | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) | Amount (\$m) | Growth (%) |
| 2001–02 | 1,430 | .. | 274 | .. | 1,704 | .. | 159 | .. | 1,862 | .. |
| 2002–03 | 1,547 | 8.2 | 241 | –11.9 | 1,788 | 5.0 | 172 | 8.4 | 1,960 | 5.3 |
| 2003–04 | 1,646 | 6.4 | 279 | 16.0 | 1,926 | 7.7 | 180 | 4.9 | 2,106 | 7.4 |
| 2004–05 | 1,777 | 8.0 | 305 | 9.0 | 2,082 | 8.1 | 189 | 4.9 | 2,271 | 7.8 |
| 2005–06 | 2,017 | 13.5 | 341 | 12.1 | 2,359 | 13.3 | 207 | 9.6 | 2,566 | 13.0 |
| 2006–07 | 2,188 | 8.5 | 388 | 13.6 | 2,576 | 9.2 | 224 | 8.1 | 2,800 | 9.1 |
| 2007–08 | 2,451 | 12.0 | 444 | 14.5 | 2,895 | 12.4 | 243 | 8.5 | 3,138 | 12.1 |
| 2008–09 | 3,045 | 24.2 | 682 | 53.7 | 3,727 | 28.8 | 328 | 35.0 | 4,056 | 29.2 |
| 2009–10 | 3,443 | 13.1 | 783 | 14.8 | 4,226 | 13.4 | 268 | –18.5 | 4,494 | 10.8 |
| 2010–11 | 3,389 | –1.6 | 796 | 1.7 | 4,186 | –1.0 | 266 | –0.5 | 4,452 | –0.9 |
| 2011–12 | 3,855 | 13.7 | 798 | 0.2 | 4,653 | 11.2 | 286 | 7.3 | 4,939 | 10.9 |
| Average annual growth rate (%) | | | | | | | | | | |
| 2001–02 to 2006–07 | | 8.9 | | 7.2 | | 8.6 | | 7.1 | | 8.5 |
| 2006–07 to 2011–12 | | 12.0 | | 15.5 | | 12.6 | | 5.0 | | 12.0 |
| 2001–02 to 2011–12 | | 10.4 | | 11.3 | | 10.6 | | 6.0 | | 10.2 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A39: Total funding for pharmaceuticals, per person, constant prices^(a), for each state and territory, 2001-02 to 2011-12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|-------------|------------|------------|------------|-----------|-----------|------------|------------|-----------|------------------|
| 2001-02 | 479 | 486 | 457 | 466 | 511 | 514 | 368 | 275 | 475 |
| 2002-03 | 500 | 495 | 476 | 464 | 520 | 529 | 382 | 260 | 488 |
| 2003-04 | 537 | 547 | 536 | 491 | 558 | 569 | 413 | 290 | 533 |
| 2004-05 | 571 | 592 | 586 | 505 | 584 | 594 | 439 | 320 | 569 |
| 2005-06 | 576 | 601 | 585 | 515 | 598 | 615 | 439 | 325 | 576 |
| 2006-07 | 612 | 637 | 627 | 552 | 629 | 658 | 464 | 344 | 612 |
| 2007-08 | 653 | 668 | 663 | 605 | 676 | 701 | 512 | 372 | 651 |
| 2008-09 | 713 | 723 | 721 | 654 | 740 | 764 | 548 | 409 | 708 |
| 2009-10 | 751 | 758 | 756 | 678 | 782 | 808 | 575 | 431 | 744 |
| 2010-11 | 868 | 849 | 795 | 736 | 911 | 940 | 640 | 450 | 832 |
| 2011-12 | 871 | 839 | 811 | 758 | 908 | 1,060 | 591 | 447 | 837 |

(a) Constant price health expenditure for 2001-02 to 2011-12 is expressed in terms of 2011-12 prices.

Source: AIHW health expenditure database.

Table A40: Medicare funding for primary health care, per person, constant prices^(a), for each state and territory, 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------|-----|-----|-----|-----|-----|-----|-----|-----|-----------|
| 2001–02 | 233 | 224 | 217 | 210 | 224 | 215 | 209 | 131 | 223 |
| 2002–03 | 227 | 219 | 209 | 205 | 219 | 208 | 205 | 129 | 217 |
| 2003–04 | 223 | 214 | 209 | 201 | 216 | 203 | 206 | 129 | 214 |
| 2004–05 | 234 | 221 | 218 | 203 | 220 | 205 | 207 | 131 | 221 |
| 2005–06 | 249 | 236 | 231 | 214 | 239 | 219 | 216 | 137 | 236 |
| 2006–07 | 254 | 241 | 231 | 211 | 239 | 222 | 222 | 146 | 238 |
| 2007–08 | 270 | 261 | 246 | 221 | 255 | 239 | 219 | 169 | 254 |
| 2008–09 | 270 | 258 | 246 | 215 | 258 | 237 | 219 | 168 | 253 |
| 2009–10 | 278 | 267 | 256 | 220 | 271 | 247 | 233 | 173 | 262 |
| 2010–11 | 283 | 277 | 266 | 220 | 277 | 472 | 250 | 178 | 274 |
| 2011–12 | 292 | 282 | 275 | 222 | 285 | 266 | 251 | 188 | 276 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A41: Medicare funding for other services, per person, constant prices^(a), for each state and territory, 2011–12 (\$)

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Australia |
|---------|-----|-----|-----|-----|-----|-----|-----|-----|-----------|
| 2001–02 | 502 | 464 | 452 | 443 | 443 | 421 | 442 | 230 | 467 |
| 2002–03 | 515 | 475 | 458 | 457 | 452 | 441 | 463 | 224 | 478 |
| 2003–04 | 515 | 487 | 483 | 462 | 460 | 425 | 537 | 191 | 487 |
| 2004–05 | 538 | 497 | 509 | 470 | 475 | 428 | 556 | 199 | 505 |
| 2005–06 | 540 | 504 | 528 | 477 | 482 | 433 | 562 | 203 | 512 |
| 2006–07 | 566 | 528 | 540 | 491 | 501 | 449 | 574 | 203 | 533 |
| 2007–08 | 609 | 560 | 547 | 511 | 523 | 496 | 492 | 273 | 560 |
| 2008–09 | 630 | 612 | 561 | 513 | 546 | 500 | 511 | 276 | 585 |
| 2009–10 | 656 | 598 | 576 | 530 | 569 | 544 | 526 | 282 | 598 |
| 2010–11 | 653 | 610 | 608 | 527 | 586 | 524 | 643 | 227 | 608 |
| 2011–12 | 698 | 633 | 625 | 540 | 595 | 559 | 553 | 299 | 633 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Table A42: Capital expenditure, by source of funds, constant prices^(a), 2001–02 to 2011–12 (\$ million)

| Year | Government | | | | | | | |
|---------------------------------------|-----------------------|------------|---------------------------------|------------|---------------------|------------|---------------------|------------|
| | Australian Government | | State and territory governments | | Non-government | | Total | |
| | Amount (\$ million) | Growth (%) | Amount (\$ million) | Growth (%) | Amount (\$ million) | Growth (%) | Amount (\$ million) | Growth (%) |
| 2001–02 | 84 | .. | 1,697 | .. | 2,370 | .. | 4,151 | .. |
| 2002–03 | 77 | –8.8 | 1,781 | 4.9 | 2,644 | 11.6 | 4,501 | 8.4 |
| 2003–04 | 96 | 25.3 | 1,203 | –32.4 | 2,786 | 5.4 | 4,085 | –9.2 |
| 2004–05 | 128 | 33.3 | 1,750 | 45.4 | 2,834 | 1.7 | 4,711 | 15.3 |
| 2005–06 | 103 | –19.5 | 2,120 | 21.2 | 2,902 | 2.4 | 5,125 | 8.8 |
| 2006–07 | 112 | 8.9 | 2,245 | 5.9 | 3,366 | 16.0 | 5,723 | 11.7 |
| 2007–08 | 111 | –1.0 | 2,075 | –7.6 | 3,477 | 3.3 | 5,663 | –1.1 |
| 2008–09 | 96 | –13.1 | 2,688 | 29.5 | 2,871 | –17.4 | 5,656 | –0.1 |
| 2009–10 | 135 | 40.3 | 2,853 | 6.1 | 2,093 | –27.1 | 5,081 | –10.2 |
| 2010–11 | 135 | 0.2 | 4,204 | 47.4 | 2,302 | 10.0 | 6,641 | 30.7 |
| 2011–12 | 336 | 148.4 | 5,111 | 21.6 | 2,408 | 4.6 | 7,855 | 18.3 |
| Average annual growth rate (%) | | | | | | | | |
| 2001–02 to 2006–07 | | 5.9 | | 5.8 | | 7.3 | | 6.6 |
| 2006–07 to 2011–12 | | 24.6 | | 17.9 | | –6.5 | | 6.5 |
| 2001–02 to 2011–12 | | 14.9 | | 11.7 | | 0.2 | | 6.6 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Appendix B Technical notes

For this publication, all expenditure that had been reported in *Health expenditure Australia 2011–12* (AIHW 2013b) and in the online health expenditure data cubes for years 2001–02 to 2011–12 (available via <<http://www.aihw.gov.au/expenditure-data/>>) has been allocated to 4 broad categories:

- hospitals
- primary health care
- other recurrent
- capital expenditure.

This allocation was based on the areas of expenditure categories historically used in the *Health expenditure Australia* series. Apart from ‘medical services’, all the historically used area of expenditure categories were allocated 100% to one of the above broad categories as shown in Table B1 below.

Table B1: Categorisation of areas of expenditure into hospitals, primary health care, other recurrent and capital expenditure

| Area of expenditure | Categorisation | Share |
|------------------------------|---|-----------------------|
| Total hospitals | Hospitals | 100% |
| Public hospital services | Hospitals | 100% |
| Private hospitals | Hospitals | 100% |
| Patient transport services | Other recurrent | 100% |
| Medical services | Partly ‘Primary health care’ and partly ‘Other recurrent’ | Varies ^(a) |
| Dental services | Primary health care | 100% |
| Other health practitioners | Primary health care | 100% |
| Community health and other | Primary health care | 100% |
| Public health | Primary health care | 100% |
| Medications | Primary health care | 100% |
| Benefit-paid pharmaceuticals | Primary health care | 100% |
| All other medications | Primary health care | 100% |
| Aids and appliances | Other recurrent | 100% |
| Administration | Other recurrent | 100% |
| Research | Other recurrent | 100% |
| Capital expenditure | Capital expenditure | 100% |
| Medical expenses tax rebate | Excluded | n.a. |

(a) See Table B2.

Medical services allocation

Medical services expenditure includes expenditure for services provided by, or on behalf of, registered medical practitioners that are funded by the Medicare Benefits Schedule (MBS), DVA, compulsory motor vehicle third-party insurance, workers compensation insurance,

private health insurance funds, Australian Government premium rebates allocated to medical services, Medicare copayments and other out-of-pocket payments.

Table B2 shows the allocation of the broad Medicare service categories to either primary health care or to other recurrent expenditure.

Table B2: Categorisation of Medicare broad type of service categories^(a) to primary health care and other recurrent expenditure, 2001–02 to 2011–12

| Medicare broad type of service category | Categorisation | Share of total Medicare medical services expenditure in 2011–12 (%) | Share of total medical services expenditure in 2011–12 (%) |
|---|---------------------|---|--|
| Non-referred attendances: GP/VRGP attendances | Primary health care | 25.4 | 21.7 |
| Non-referred attendances: enhanced primary care attendances | Primary health care | 4.0 | 3.4 |
| Non-referred attendances: other non-referred attendances | Primary health care | 0.9 | 0.7 |
| Non-referred attendances: practice nurse | Primary health care | 0.2 | 0.1 |
| Specialist attendances | Other recurrent | 13.4 | 11.5 |
| Obstetrics | Other recurrent | 2.3 | 2.0 |
| Anaesthetics | Other recurrent | 4.3 | 3.7 |
| Pathology episode initiation | Other recurrent | 1.5 | 1.3 |
| Pathology test | Other recurrent | 10.4 | 8.9 |
| Diagnostic imaging | Other recurrent | 14.4 | 12.3 |
| Operations | Other recurrent | 13.5 | 11.6 |
| Assistance at operations | Other recurrent | 0.7 | 0.6 |
| Radiotherapy and therapeutic nuclear medicine | Other recurrent | 1.3 | 1.1 |
| Other MBS | Other recurrent | 7.8 | 6.7 |
| Total | | 100.0 | 85.6 |

(a) Excludes dental, allied health and optometry because these are not medical services.

Medical services also include non-MBS medical services, such as the provision of vaccines for overseas travel, as well as some expenditure by the Australian Government under alternative funding arrangements. This expenditure has been allocated to primary health care in this report.

Private health insurers generally do not pay out benefits for medical services received through the primary health care setting. Therefore, any private health insurance benefits paid out for medical services (along with the proportion of the private health insurance premium rebate assigned to medical services) have been allocated to other recurrent expenditure rather than to primary health care in this report.

Table B3 shows the allocation of expenditure for medical services to primary health care compared with other recurrent expenditure between 2001–02 and 2011–12.

Table B3: Total expenditure on medical services, by broad area of expenditure, constant prices^(a), 2001–02 to 2011–12

| Year | Primary health care | | Other recurrent | | Total | |
|---------|---------------------|-----------|-----------------|-----------|--------------|-----------|
| | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) | Amount (\$m) | Share (%) |
| 2001–02 | 7,048 | 43.8 | 9,048 | 56.2 | 16,095 | 100.0 |
| 2002–03 | 7,005 | 42.8 | 9,372 | 57.2 | 16,377 | 100.0 |
| 2003–04 | 7,063 | 42.2 | 9,659 | 57.8 | 16,722 | 100.0 |
| 2004–05 | 7,479 | 42.5 | 10,120 | 57.5 | 17,599 | 100.0 |
| 2005–06 | 7,221 | 41.0 | 10,405 | 59.0 | 17,627 | 100.0 |
| 2006–07 | 7,501 | 40.6 | 10,986 | 59.4 | 18,488 | 100.0 |
| 2007–08 | 8,252 | 41.2 | 11,769 | 58.8 | 20,022 | 100.0 |
| 2008–09 | 8,359 | 40.0 | 12,561 | 60.0 | 20,920 | 100.0 |
| 2009–10 | 8,837 | 40.3 | 13,067 | 59.7 | 21,904 | 100.0 |
| 2010–11 | 9,445 | 41.2 | 13,474 | 58.8 | 22,919 | 100.0 |
| 2011–12 | 9,651 | 40.4 | 14,249 | 59.6 | 23,900 | 100.0 |

(a) Constant price health expenditure for 2001–02 to 2011–12 is expressed in terms of 2011–12 prices.

Source: AIHW health expenditure database.

Glossary

admitted patient: A patient who undergoes a hospital's formal admission process to receive treatment and/or care. This treatment and/or care is provided over a period of time and can occur in hospital and/or in the person's home (for hospital-in-the-home patients).

aids and appliances: Durable medical goods dispensed to ambulatory patients that are used more than once, for therapeutic purposes, such as glasses, hearing aids, wheelchairs and orthopaedic appliances and prosthetics that are not implanted surgically but are external to the user of the appliance. Excludes prostheses fitted as part of admitted patient care in a hospital.

Australian Government health expenditure: Total expenditure actually incurred by the Australian Government on its own health programs. It does not include the funding provided by the Australian Government to the states and territories by way of grants under section 96 of the Constitution.

Australian Government health funding: The sum of Australian Government expenditure and section 96 grants to states and territories. This includes the 30–40% private health insurance premium rebates.

average annual growth rate: To calculate the average annual growth rate in health expenditure between 2001–02 and 2011–12, the following formula applies:
$$((\$ \text{ million in 2011–12} / \$ \text{ million in 2001–02})^{(1/10)} - 1) * 100.$$

benefit-paid pharmaceuticals: Pharmaceuticals listed in the schedule of the Pharmaceutical Benefits Scheme (PBS) and the Repatriation Pharmaceutical Benefits Scheme (RPBS) for which pharmaceutical benefits have been paid or are payable. Does not include listed pharmaceutical items where the full cost is met from the patient copayment under the PBS or RPBS.

capital consumption: The amount of fixed capital used up each year in the provision of health goods and services (sometimes referred to as depreciation).

capital expenditure: Expenditure on fixed assets (for example, new buildings and equipment with a useful life that extends beyond 1 year). This does not include changes in inventories. This term is used in this publication to refer to what the ABS calls gross fixed capital formation. See *Capital formation*.

capital formation: Gross fixed capital formation is the value of acquisitions less disposals of new or existing fixed assets. Assets consist of tangible or intangible assets that have come into existence as outputs from processes of production, and that are themselves used repeatedly or continuously in other processes of production over periods of time longer than 1 year. See *Australian national accounts: concepts, sources and methods* (ABS 2000) for further details.

chain price index: An annually re-weighted index providing a close approximation to measures of pure price change.

community health services: Non-residential health services offered by establishments to patients/clients, in an integrated and coordinated manner in a community setting, or the coordination of health services elsewhere in the community. Such services are provided by, or on behalf of, state and territory governments.

Includes, for example:

- well baby clinics
- health services provided to particular groups, such as Aboriginal and Torres Strait Islander people, women, youth and migrants, as well as family planning services, alcohol and drug treatment services
- specialised mental health programs delivered in a community setting.

constant prices: Constant price expenditure adjusts current prices for the effects of inflation; that is, it aims to remove the effects of inflation. Constant price estimates for expenditure aggregates have been derived using either annually re-weighted chain price indexes or implicit price deflators (IPDs). The reference year for both the chain price indexes and the IPDs is 2011–12 in this report. Constant price estimates indicate what expenditure would have been had 2011–12 prices applied in all years. Hence, expenditures in different years can be compared on a dollar-for-dollar basis, using this measure of changes in the volume of health goods and services.

current prices: The term ‘current prices’ refers to expenditures reported for a particular year, unadjusted for inflation. Changes in current price expenditures reflect changes in both price and volume.

dental services: Services provided by registered dental practitioners, such as: oral and maxillofacial surgery items; orthodontic, pedodontic and periodontic services; cleft lip and palate services; dental assessment and treatment; and other dental items listed in the MBS.

health administration: Activities related to the formulation and administration of government and non-government policy in health and in the setting and enforcement of standards for health personnel and for hospitals, clinics, and so forth. Includes the regulation and licensing of providers of health services.

It includes only those administrative services that cannot be allocated to a specific health good and service. Those unallocatable services might include, for example: maintaining an office of the Chief Medical Officer; a Departmental liaison officer in the office of the Minister; or a number of other agency-wide items for which it is not possible to derive appropriate or meaningful allocations to particular health programs.

health research: Research undertaken at tertiary institutions, in private non-profit organisations and in government facilities that has a health socioeconomic objective.

Excludes commercially oriented research funded by private business, the costs of which are assumed to be included in the prices charged for the goods and services (for example, medications that have been developed and/or supported by research activities).

hospital services: Services provided to a patient who is receiving admitted patient services or non-admitted patient services in a hospital, but *excludes* dental services, community health services, patient transport services, public health activities and health research undertaken within the hospital. Can include services provided off-site, such as hospital in the home, dialysis or other services.

implicit price deflator (IPD): An index obtained using the ratio of current price expenditure to constant price expenditure.

individuals' out-of-pocket funding: Payments by individuals where they meet the full cost of a good or service as well as where they share the cost of goods and services with third-party payers, such as private health insurance funds or the Australian Government.

injury compensation insurers: Workers compensation and compulsory third-party motor vehicle insurers.

jurisdictions: State, territory and local governments.

local government: A public sector unit where the political authority underlying its function is limited to a local government area or other region within a state or territory, or the functions involve policies that are primarily of concern at the local level.

medical durables: Therapeutic devices, such as glasses, hearing aids and wheelchairs that can be used more than once.

medical services: Includes services provided by, or on behalf of, registered medical practitioners that are funded by the Medicare Benefits Schedule (MBS), DVA, compulsory motor vehicle third-party insurance, workers compensation insurance, private health insurance funds, Australian Government premium rebates allocated to medical services, Medicare copayments and other out-of-pocket payments.

Most medical services in Australia are provided on a fee-for-service basis and attract benefits from the Australian Government under Medicare. These include both private in-hospital medical services and out-of-hospital medical services.

They also include non-MBS medical services, such as the provision of vaccines for overseas travel, as well as some expenditure by the Australian Government under alternative funding arrangements.

Excludes medical services provided to public admitted patients in public hospitals and medical services provided to public patients at outpatient clinics in public hospitals.

medical expenses tax rebate: Applies in regard to a wide range of health expenditures, not just expenses associated with doctors. It cannot be specifically allocated to the various areas of health expenditure.

Individuals are able to claim a rebate in respect of that part of their eligible personal health expenses that exceeds a threshold in an income year. For the 2011–12 income year, the tax rebate was 20 cents for each \$1 by which a taxpayer's net medical expenses exceeded \$2,060 (the threshold).

These tax expenditures are a form of funding only. The related expenditures have already been allocated to particular area(s) of health expenditure, but it is not possible to allocate this form of funding to particular health expenditure areas.

The Australian Department of the Treasury estimates other tax expenditures in the health area, such as the cost of exempting low-income earners from the Medicare levy. These tax expenditures are not included in the Australian NHA framework.

medications: Benefit-paid pharmaceuticals and other medications.

non-admitted patient: Patients who receive care from a recognised non-admitted patient service/clinic of a hospital.

other health practitioner services: Services provided by health practitioners (other than doctors and dentists). These include chiropractors, optometrists, physiotherapists, speech

therapists, audiologists, dieticians, podiatrists, homeopaths, naturopaths, practitioners of Chinese medicine and other forms of traditional medicine.

other medications: Pharmaceuticals for which no PBS or RPBS benefit was paid. They include:

- pharmaceuticals listed in the PBS or RPBS, the total costs of which are equal to, or less than, the statutory patient contribution for the class of patient (under copayment pharmaceuticals)
- pharmaceuticals dispensed through private prescriptions that do not fulfil the criteria for payment of benefit under the PBS or RPBS over-the-counter medicines including pharmacy-only medicines, aspirin, cough and cold medicines, vitamins and minerals, herbal and other complementary medicines, and a range of medical non-durables, such as condoms, adhesive and non-adhesive bandages.

other recurrent health services n.e.c.: Miscellaneous expenditures that could not, at that time, be allocated to the specific health expenditure areas in the matrix.

over-the-counter medicines: Therapeutic medicinal preparations that can be purchased from pharmacies and supermarkets.

over-the-counter therapeutic medical non-durables: Non-prescription therapeutic goods that tend to be single-use items, such as bandages, elastic stockings, condoms and other mechanical contraceptive devices, from pharmacies or supermarkets.

patient transport services: Expenditure by organisations primarily engaged in providing transportation of patients by ground or air, along with health (or medical) care. These services are often provided during a medical emergency but are not restricted to emergencies. The vehicles are equipped with lifesaving equipment operated by medically trained personnel. Includes public ambulance services or flying doctor services, such as Royal Flying Doctor Service and Care Flight. Also includes patient transport programs, such as patient transport vouchers or support programs to assist isolated patients with travel to obtain specialised health care. For 2003–04 onwards, this category includes patient transport expenses that are included in the operating costs of public hospitals.

Pharmaceutical Benefits Scheme (PBS): A national, government-funded scheme that subsidises the cost of a wide range of pharmaceutical drugs, and that covers all Australians to help them afford standard medications. The Pharmaceutical Benefits Schedule (schedule) lists all the medicinal products available under the PBS and explains the uses for which they can be subsidised.

primary health care: Primary health care expenditure includes recurrent expenditure on health goods and services such as medical services, dental services, other health practitioner services, pharmaceuticals and community and public health services. Primary health care services are delivered in numerous settings such as general practices, community health centres, allied health practices (for example, physiotherapy, dietetic and chiropractic practices, and tele-health) and under numerous funding arrangements.

Private Health Insurance Incentives Scheme (PHIIS): The PHIIS was introduced on 1 July 1997 to encourage more people to take out private health insurance. It provided a subsidy to low-income earners who did, and a tax penalty to high-income earners who did not. Middle-income earners were not the target of this policy and, as such, were neither eligible for the tax subsidy nor liable to incur a tax penalty, regardless of their private health insurance status. The scheme ended on 31 December 1998.

private hospital: A health care provider facility, other than a public hospital, that has been established under state or territory legislation as a hospital or freestanding day procedure unit and authorised to facilitate the provision of hospital services to patients. A private hospital is not defined by whether it is privately owned but by whether it is *not* a public hospital (as defined below). Private hospital expenditure includes expenditures incurred by a private hospital in providing contracted and/or ad hoc treatments for public patients.

private patient: A person admitted to a private hospital, or a person admitted to a public hospital who is treated by a doctor of their own choice and/or who has private ward accommodation. This means that the patient will be charged for medical services, food and accommodation.

public health activities: Nine types of activities undertaken or funded by the key jurisdictional health departments that deal with issues related to populations, rather than individuals. These activities comprise:

- communicable disease control
- selected health promotion
- organised immunisation
- environmental health
- food standards and hygiene
- breast cancer, cervical and bowel cancer screening
- prevention of hazardous and harmful drug use
- public health research.

These activities do not include treatment services.

public health services: Services provided and/or funded by governments that are aimed at protecting and promoting the health of the whole population or specified population subgroups and/or preventing illness or injury in the whole population or specified population subgroups.

Public health services do not include treatment services.

For 2001–02 onwards, public health services also include departmental costs for the following departmental regulators: Therapeutic Goods Administration, Office of Gene Technology Regulator and the National Industrial Chemicals Notification and Assessment Scheme.

public hospital: A health-care provider facility that has been established under state or territory legislation as a hospital or as a freestanding day procedure unit. Public hospitals are operated by, or on behalf of, the government of the state or territory in which they are established and are authorised under that state/territory's legislation to provide or facilitate the provision of hospital services to patients. Public hospitals are recognised under the National Health Care Agreements and include some hospitals, such as some denominational hospitals, that are privately owned. Defence force hospitals are not included in the scope of public hospitals.

public hospital services: The balance of public hospital expenditure remaining, after community health services, public health services, non-admitted dental services, patient

transport services and health research activities that are undertaken by public hospitals have been removed and reallocated to their own expenditure categories.

public patient: A patient admitted to a public hospital who is treated by doctors of the hospital's choice and accepts shared ward accommodation if necessary. This means that the patient is not charged.

real expenditure: Expenditure that has been adjusted to remove the effects of inflation (for example, expenditure for all years has been compiled using 2011–12 prices). Removing the effects of inflation enables comparisons to be made between expenditures in different years on an equal dollar-for-dollar basis. Changes in real expenditure measure the change in the volume of goods and services produced.

rebates of health insurance premiums: Introduced in January 1999, a non-means-tested rebate on private health insurance premiums replaced the PHIIS subsidy. There are 2 types of rebates of health insurance premiums.

The first rebate is where the 30–40% rebate is taken as a reduced premium payable by the individual with private health cover (with the health fund claiming payment from the Australian Government).

The second rebate is taken as an income tax rebate, where individuals with private health cover elect to claim the rebate through the tax system at the end of the financial year for the 30–40% rebate, having paid the health funds 100% of their premiums up front.

recurrent expenditure: Expenditure incurred by organisations on a recurring basis, for the provision of health goods and services, which does not result in the creation or acquisition of fixed assets (new or second-hand). It consists mainly of expenditure on wages, salaries and supplements, purchases of goods and services and consumption of fixed capital. This excludes capital expenditure. For all years, recurrent expenditure includes capital consumption (depreciation).

Repatriation Pharmaceutical Benefits Scheme (RPBS): Provides assistance to eligible veterans (with recognised war- or service-related disabilities) and their dependants for pharmaceuticals listed on the PBS and a supplementary repatriation list, at the same cost as patients entitled to the concessional payment under the PBS.

state and territory dental services: School dental programs, community dental services and hospital dental programs funded by state and territory health authorities.

therapeutic: relating to the treating or curing of a disease.

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Related publications

This report, *Health expenditure Australia 2011–12: analysis by sector*, is a companion to *Health expenditure Australia 2011–12*. Both reports can be downloaded free from the AIHW website < <http://www.aihw.gov.au/expenditure-publications/> >. The website also includes information on ordering printed copies.

The following AIHW publications relating to health expenditure might also be of interest:

AIHW 2013. Expenditure on health for Aboriginal and Torres Strait Islander people 2010–11. Health and welfare expenditure series no. 48. Cat. no. HWE 57. Canberra: AIHW.

AIHW 2013. Expenditure on health for Aboriginal and Torres Strait Islander people 2010–11: an analysis by remoteness and disease. Health and welfare expenditure series no. 49. Cat. no. HWE 58. Canberra: AIHW.

This report extends the analysis presented in *Health expenditure Australia 2011–12* to further explore expenditure on particular categories of health goods and services, including hospitals, primary health care, other recurrent health expenditure and capital expenditure. In 2011–12, a total of \$132.4 billion was spent on recurrent health expenditure where 40.4% (\$53.5 billion) was spent on hospitals, 38.2% (\$50.6 billion) was spent on primary health care and the remaining 21.3% (\$28.3 billion) was spent on other areas of health spending. Capital expenditure accounted for a further \$7.9 billion bringing the total expenditure on health goods and services in 2011–12 to \$140.2 billion.